2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000034

FILED Feb 28, 2006 Secretary of State

Entity Name: POINT LAKE VILLAS CONDOMINIUM ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: P.O. BOX 831235 MIAMI, FL 33283 US **Current Mailing Address: New Mailing Address:** P.O. BOX 831235 MIAMI, FL 33283 US FEI Number: 65-0458591 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TRIAY, CARLOS 10570 NW 27TH STREET, SUITE #103 MIAMI, FL 33172 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete URQUIOLA, JOSE VILA, ROBERTO Name: Name: 15378 SW 77 LN Address: 13215 SW 45 TERRACE Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33175 Title: Title: (X) Change () Addition () Delete MOLINE, JOSE Name: BUNTEN, HELEN Name: Address: 15315 SW 76 TERR #202 Address: 7640 SW 153RD COURT.UNIT 102 City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: T,D (X) Change () Addition VILA, MARIA VILORIA, LEDDY Name: Name: 15390 SW 76 TERR #102 15315 SW 76 TERR #204 Address: Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: S,D (X) Change () Addition OCAMPO, RODRIGO Name: Name: URQUIOLA, ANDREA Address: 7611 SW 153 CT # 204 Address: 15363 SW 77 LANE City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33193 Title: () Delete Title: () Change (X) Addition PEREZ, RAFAEL Name: Name: 15350 SW 77 LANE, UNIT 207 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33193

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTO VILA P,D 02/28/2006