

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13073

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** GABLES POINT III CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

13388 S.W. 128TH ST.  
MIAMI, FL 33186 US

**New Principal Place of Business:**

13501 SW 128 STREET, #216  
MIAMI, FL 33186 US

**Current Mailing Address:**

13388 S.W. 128TH ST.  
MIAMI, FL 33186 US

**New Mailing Address:**

13501 SW 128 STREET, #216  
MIAMI, FL 33186 US

**FEI Number:** 59-2629077

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FRANCISCO JOSE AGUERO, PA  
2655 LEJEUNE ROAD  
PENTHOUSE 1-D  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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:**

Title: PD  
Name: GILLHAM, PAULINE  
Address: 6845 SW 45 LANE, #5  
City-St-Zip: MIAMI, FL 33155

Title: SD  
Name: NOLAN, JACK JR  
Address: PO BOX 557334  
City-St-Zip: MIAMI, FL 33255

Title: TD  
Name: COSCULLUELA, BEATRIZ  
Address: 600 BILTMORE WAY, #504  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

**SIGNATURE:** PAULINE GILLHAM

PD

03/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date