

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737127

FILED
Feb 26, 2014
Secretary of State
CC0647514776**Entity Name:** EAST WIND LAKE VILLAGE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**8300 WEST FLAGLER STREET
#121-129
MIAMI, FL 33144**Current Mailing Address:**8300 WEST FLAGLER STREET
#121-129
MIAMI, FL 33144**FEI Number: 59-1721248****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ASSOCIATION LAW GROUP, P.L.
1666 KENNEDY CAUSEWAY
THIRD FLOOR
NORTH BAY VILLAGE, FL 33141 US*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**Officer/Director Detail :**

Title	PRESIDENT
Name	VAZQUEZ, AIDA T
Address	8300 WEST FLAGLER STREET #121-129
City-State-Zip:	MIAMI FL 33144

Title	VPD
Name	DE VINELLI, GLADYS
Address	8300 WEST FLAGLER STREET #121-129
City-State-Zip:	MIAMI FL 33144

Title	TREASURER
Name	MIRO, SILVIA
Address	8300 WEST FLAGLER STREET #121-129
City-State-Zip:	MIAMI FL 33144

Title	SECRETARY
Name	GRAVES, JAMES
Address	8300 WEST FLAGLER STREET #121-129
City-State-Zip:	MIAMI FL 33144

Title	DIRECTOR
Name	GARCIA, MANUEL I.
Address	8300 WEST FLAGLER STREET #121-129
City-State-Zip:	MIAMI FL 33144

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: AIDA VAZQUEZ**PRESIDENT****02/26/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date