

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753673

**Entity Name:** THE WESTLAND CONDOMINIUM ASSOC., INC.

**Current Principal Place of Business:**

1800 W 54TH STREET  
HIALEAH, FL 33012

**FILED**  
**Feb 24, 2015**  
**Secretary of State**  
**CC7971520364**

**Current Mailing Address:**

C/O TPS MANAGEMENT  
P.O. BOX 661554  
MIAMI SPRINGS, FL 33266 US

**FEI Number: 59-2299731**

**Certificate of Status Desired: No**

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

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
SUITE C-207  
FT. LAUDERDALE, FL 33312 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           TREASURER, DIRECTOR  
Name           RODRIGUEZ, IRMA N  
Address        P O BOX 661554  
City-State-Zip: MIAMI SPRINGS FL 33266

Title           VP, DIRECTOR  
Name           HERNANDEZ, JUAN  
Address        P O BOX 661554  
City-State-Zip: MIAMI SPRINGS FL 33266

Title           PRESIDENT, DIRECTOR  
Name           ALFARO, CARLOS  
Address        P O BOX 661554  
City-State-Zip: MIAMI SPRINGS FL 33266

Title           SECRETARY, DIRECTOR  
Name           HERNANDEZ, LUIS  
Address        P O BOX 661554  
City-State-Zip: MIAMI SPRINGS FL 33266

Title           DIRECTOR  
Name           DE LLANO, JORGE  
Address        P O BOX 661554  
City-State-Zip: MIAMI SPRINGS FL 33266

*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: CARLOS ALFARO**

**PRESIDENT**

**02/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date