

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00386

**FILED**  
**Jan 09, 2024**  
**Secretary of State**  
**2664252985CC**

**Entity Name:** CASA LINDA TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5895-5963 W. 16 LN  
HIALEAH, FL 33012

**Current Mailing Address:**

C/O CAM MANAGEMENT SERVICES, CORP.  
P.O. BOX 5103  
HIALEAH, FL 33014 US

**FEI Number: 59-2401307**

**Certificate of Status Desired: No**

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

CAM MANAGEMENT SERVICES, CORP.  
6065 N.W. 167TH ST.  
UNIT #B19  
MIAMI LAKES, FL 33015 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 VP  
Name GONZALEZ, VIRGILIO  
Address 5903 W. 16TH LANE.  
City-State-Zip: HIALEAH FL 33012

Title SD  
Name VILLETA, KENIA  
Address 5963 W. 16TH LANE.  
P.O. BOX 5103  
City-State-Zip: HIALEAH FL 33012

Title TD, PRESIDENT  
Name ALVAREZ, ALBERTO  
Address 18001 N.W. 42ND CT.  
City-State-Zip: MIAMI GARDENS FL 33055

*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: ALBERTO ALVAREZ**

**PRESIDENT**

**01/09/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date