

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000005346

**Entity Name:** VILLA ALHAMBRA OF CORAL GABLES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**50 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134**Current Mailing Address:**C/O GALIANO PROPERTY MANAGEMENT, LLC  
5601 COLLINS AVE SUITE CU-8  
MIAMI BEACH, FL 33140 US**FEI Number: 26-2408574****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FERNANDEZ, DANIA S  
DANIA S. FERNANDEZ & ASSOIATES, PA  
10205 S. DIXIE HIGHWAY SUITE #204  
MIAMI, FL 33156 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	INNS, DANIEL ANEURIN
Address	50 ALHAMBRA CIRCLE UNIT#306
City-State-Zip:	CORAL GABLES FL 33134

Title	VP
Name	VOLAKIS, MARIA
Address	50 ALHAMBRA CIRCLE UNIT#105
City-State-Zip:	CORAL GABLES FL 33134

Title	T
Name	FOSTER, STEPHEN MARK
Address	50 ALHAMBRA CIRCLE UNIT#311
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRECTOR
Name	RUA, VICKY
Address	50 ALHAMBRA CIRCLE UNIT#304
City-State-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: INNS , DANIEL ANEURIN****PRESIDENT****01/26/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date