2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#714321

FILED Feb 23, 2009 Secretary of State

Entity Name: GREEN HILLS PARK WEST NO. 1, INC.

Current Principal Place of Business: New Principal Place of Business:

17070 S. W. 112TH COURT MIAMI, FL 33157

Current Mailing Address: New Mailing Address:

C/O MIAMI MANAGEMENT 14275 SW 142 AVE MIAMI, FL 33186

FEI Number: 59-1215258 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TRIAY, CARLOS ESQ TRIAY, CARLOS ESQ 10570 NW 27TH ST. 2301 NW 87TH AVENUE SUITE 103 SUITE 501 MIAMI, FL 33172 US MIAMI, FL 33172 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.

Title:

SIGNATURE: 02/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

VD

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BENITEZ, MIGDEL WINTERS, STEPHEN Name: Name: Address:

11275 SW 172 ST Address: 14275 SW 142 AVENUE City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33186

(X) Change () Addition () Delete SISAK, JOHN, Name: BENITEZ, MIGUEL Name: Address: 11259 SW 172 ST. Address: 14275 SW 142 AVENUE City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33186

Title: () Delete Title: S/D (X) Change () Addition WINTERS, STEPHEN TAYLOR, MARY Name: Name:

17144 SW 112TH CT Address: Address: 14275 SW 142 AVENUE City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33186

Title: S/D () Delete Title: (X) Change () Addition

BLUM, AUDREY Name: Name: BLUM, AUDREY 17142 SW 112 CT Address: Address: 14275 SW 142 AVENUE City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33186

Title: (X) Delete Title: () Change () Addition

TAYLOR, MARY Name: Name: 11293 SW 172 ST Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSE R CORBO **MNGR** 02/23/2009