


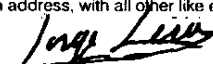


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 06, 2008 8:00 am**  
**Secretary of State**

01-11-2008 90065 045 \*\*\*\*70.00

<b>DOCUMENT # 724297</b> 1. Entity Name <b>WESTLAND COURTS CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>1855 WEST 60TH STREET HIALEAH, FL 33012</b>			Mailing Address <b>1855 WEST 60TH STREET HIALEAH, FL 33012</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.		<b>66000759</b> 	
City & State  Zip		City & State  Zip		4. FEI Number <b>59-1562327</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>LINARES, WALDEMIS 1855 W 60TH, APT 428-C HIALEAH, FL 33012</b>				7. Name and Address of New Registered Agent Name <b>LERA, JORGE A</b> Street Address (P.O.-Box Number is Not Acceptable) <b>1855 W 60TH ST APT 425-C</b> City <b>HIALEAH FL 33012</b>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		<b>JORGE A. LERA - TREASURER/DIRECTOR</b>		01/07/2008	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
Make check payable to <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>LINARES, WALDEMIS</b> <b>1855 W 60TH ST APT 428-C</b> <b>HIALEAH, FL 33012</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>SOLA, RAFAEL</b> <b>1855 W 60TH ST APT 336-A</b> <b>HIALEAH, FL 33012</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>OLAZABAL, DANILO H</b> <b>1855 W 60TH ST APT 224-C</b> <b>HIALEAH, FL 33012</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>CASALLAS, ROLANDO</b> <b>1855 W 60TH ST, APT 343-C</b> <b>HIALEAH, FL 33012</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>LERA, JORGE A</b> <b>1855 W 60TH ST APT 425-C</b> <b>HIALEAH, FL 33012</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>GUERRA, BLANCA</b> <b>1855 W 60TH ST APT 330-A</b> <b>HIALEAH, FL 33012</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>SOLA, GRACIELLA</b> <b>1855 WEST 60TH STREET APT 336-A</b> <b>HIALEAH, FL 33012</b>	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT <b>CASALLAS, ORLANDO</b> <b>1855 WEST 60TH STREET, APT 411-C</b> <b>HIALEAH, FL 33012</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> 		<b>JORGE A. LERA</b>		01/07/2008	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	