

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 30, 2008
Secretary of State**

DOCUMENT# 727018

Entity Name: W.G.C. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:1350 WEST 53RD ST
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**% TPS MANAGEMENT
PO BOX 661554
MIAMI SPRINGS, FL 33266**New Mailing Address:**PO BOX 160310
HIALEAH, FL 33016

FEI Number: 65-0244031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:SKRLD, INC.
201 ALHAMBRA CIRCLE, STE 1102
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**ARTEAGA, OTTO
1350 WEST 53RD STREET #5
HIALEAH, FL 33016 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: /OTTO ARTEAGA/

10/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: VTD () Delete
Name: QUILES, LOURDES E
Address: 1350 WEST 53RD STREET #4
City-St-Zip: HIALEAH, FL 33012Title: PD () Delete
Name: ARTEAGA, OTTO
Address: 1350 WEST 53RD STREET #5
City-St-Zip: HIALEAH, FL 33012Title: SD () Delete
Name: CASTRO, ROGELIO
Address: 1350 WEST 53RD STREET #25
City-St-Zip: HIALEAH, FL 33012**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
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: OTTO ARTEAGA

PD

10/30/2008

Electronic Signature of Signing Officer or Director

Date