

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2009
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:

PO BOX 160310
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 65-0244031 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARTEAGA, OTTO
1350 WEST 53RD STREET #5
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VTD () Delete
Name: QUILES, LOURDES E
Address: 1350 WEST 53RD STREET #4
City-St-Zip: HIALEAH, FL 33012

Title: PD () Delete
Name: ARTEAGA, OTTO
Address: 1350 WEST 53RD STREET #5
City-St-Zip: HIALEAH, FL 33012

Title: 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

04/16/2009

Electronic Signature of Signing Officer or Director

Date