

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728949

FILED
Mar 31, 2009
Secretary of State

Entity Name: VALENCIA VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

UNITED COMMUNITY CORP.
11784 W. SAMPLE RD #103
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

UNITED COMMUNITY CORP.
11784 W. SAMPLE RD #103
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-1614649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED COMMUNITY MGT. CORP
11784 W. SAMPLE ROAD
#103
CORAL SPRINGS, FL 33065 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: PD () Delete
Name: COLON, RODNEY
Address: 29 SEVILLE CIRCLE
City-St-Zip: DAVIE, FL 33324

Title: SD () Delete
Name: ZENO, MARIEL
Address: 32 CORTEZ WAY
City-St-Zip: DAVIE, FL 33324

Title: VD () Delete
Name: ESCALA, CARMEN
Address: 54 MATADOR LANE
City-St-Zip: DAVIE, FL 33324

Title: D () Delete
Name: MARTIN, EDUARDO
Address: 30 SEVILLE CIRCLE
City-St-Zip: DAVIE, FL 33324

Title: D () Delete
Name: MOON, CHARLOTTE
Address: 19 NORTH VALENCIA DR
City-St-Zip: DAVIE, FL 33324

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: ESCALA, CARMEN
Address: 54 MATADOR LANE
City-St-Zip: DAVIE, FL 33324

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: DOYLET, FERNANDO
Address: 20 NORTH VALENCIA DRIVE
City-St-Zip: DAVIE, FL 33324

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: MARY LOU PALMER

AGT

03/31/2009

Electronic Signature of Signing Officer or Director

Date