2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729584

FILED Mar 26, 2009 Secretary of State

Entity Name: CORAL WAY VILLAGE ASSOCIATION, INC.

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

10300 S.W. 24TH STREET MIAMI, FL 33165

Current Mailing Address: New Mailing Address:

8299 CORAL WAY MIAMI, FL 33155

FEI Number: 59-1554456 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:

PROPERTY MNGT. SERVICES 8299 CORAL WAY MIAMI, FL 33155

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete ANGULO, ALGERTO ANGULO, ALBERTO Name: Name:

11235 SW 33 CIRCLE PLACE Address: 11235 SW 33 CIRCLE PLACE Address:

City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33165

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

RUIZ, EDDY Name: RUIZ, EDDY Name:

Address: 10300 SW 24 STREET, C-22 Address: 10300 SW 24 STREET, C-22 City-St-Zip:

MIAMI, FL 33161 City-St-Zip: MIAMI, FL 33161

Title: () Delete Title: (X) Change () Addition FERNANDEZ, PURA BESTARD, JOSE M Name: Name:

10300 SW 24TH STREET, #E-24 Address: Address: 10300 SW 24TH STREET,

City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33165

Title: SD () Delete Title: (X) Change () Addition Name: LOPEZ, TERESA Name: MIYAR, MANUEL

10300 SW 24 ST 10300 SW 24 ST Address: Address: City-St-Zip: MIAMI, FL 33161 City-St-Zip: MIAMI, FL 33161

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

MARINEZ, LUISA MARTINEZ, LUISA Name: Name:

10300 SW 24 STREET B25 10300 SW 24 STREET B25 Address: Address: City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33165

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: ALBERTO ANGULO PD 03/26/2009