

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729601

FILED  
Feb 27, 2009  
Secretary of State

**Entity Name:** GRATIGNY PLAZA CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

7345 W 4TH AVENUE  
APT 408  
HIALEAH, FL 33014 US

**New Principal Place of Business:**

**Current Mailing Address:**

7345 W 4TH AVENUE  
APT 408  
HIALEAH, FL 33014 US

**New Mailing Address:**

**FEI Number:** 59-1612846

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOLER, OLGA  
7345 WEST 4TH AVE. APT. 408  
HIALEAH, FL 33014 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: MOLLEDA, JOSE  
Address: 7355 W 4TH AVE #416  
City-St-Zip: HIALEAH, FL 33014

Title: SD ( ) Delete  
Name: MONTERO, AMPARO  
Address: 7345 W 4TH AVE #406  
City-St-Zip: HIALEAH, FL 33014

Title: SD ( ) Delete  
Name: PRIETO, OLGA  
Address: 7345 WEST 4TH AVENUE #202  
City-St-Zip: HIALEAH, FL 33014

Title: TD ( ) Delete  
Name: CASTILLO, ZORAIDA  
Address: 7345 W 4TH AVE #408  
City-St-Zip: HIALEAH, FL 33014

**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:

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: ZORAIDA CASTILLO

MS

02/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date