

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State

03-08-2007 90017 004 ****61.25

DOCUMENT # 732071					
1. Entity Name FUTURA VILLAS CONDOMINIUM ASSOCIATION NO. 6, INC.					
Principal Place of Business % FRANCISCO RODRIGUEZ 185 NW 139 ST. MIAMI FL 33168 US			Mailing Address % FRANCISCO RODRIGUEZ 185 NW 139 ST. MIAMI FL 33168 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-1651156	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent RODRIGUEZ, FRANCISCO 185 NW 139 ST MIAMI FL 33168				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME
	OD	RODRIGUEZ, FRANCISCO	185 NW 139 ST. MIAMI FL 33168		
	S	CASELOW, LOURDES	185 NW 139 ST MIAMI FL 33168		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____			3/27/2007 Date _____ Daytime Phone # _____		

305-326-8856