

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Dec 01, 2012
Secretary of State**

DOCUMENT# 733340

Entity Name: VIRGINIA OAKS CONDOMINIUM ASSOCIATION, INC**Current Principal Place of Business:**3304 VIRGINIA STREET
COCONUT GROVE, FL 33133**New Principal Place of Business:****Current Mailing Address:**CADICORP MANAGEMENT GROUP
7700 NORTH KENDALL DRIVE SUITE 501
MIAMI, FL 33156 US**New Mailing Address:****FEI Number:** 59-1653622 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CADICORP MANAGEMENT GROUP
7700 NORTH KENDALL DRIVE
SUITE 501
MIAMI, FL 33156 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: TD
Name: MARCIA, VAN VLIET
Address: 2304 VIRGINIA ST
City-St-Zip: COCONUT GROVE, FL 33133

Title: PD
Name: RAIZA, GARCIA
Address: 2304 VIRGINIA ST
City-St-Zip: COCONUT GROVE, FL 33133

Title: D
Name: TORRE, MARIE
Address: 3304 VIRGINIA STREET
City-St-Zip: COCONUT GROVE, FL 33133

Title: D
Name: ARMENTERO, ORLANDO
Address: 3304 VIRGINIA ST
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD
Name: MERCADER, SEBASTIAN
Address: 3304 VIRGINIA ST
City-St-Zip: COCONUT GROVE, FL 33133

Title: D
Name: SMIT, OLAV
Address: 3304 VIRGINIA ST
City-St-Zip: COCONUT GROVE, FL 33133

I hereby 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 all other like empowered.

SIGNATURE: RAIZA GARCIA

PD

12/01/2012

Electronic Signature of Signing Officer or Director

Date