

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 06, 2009
Secretary of State

DOCUMENT# 744836

Entity Name: THE PLAZA OF WESTLAND CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4675 W. 18TH COURT
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**4675 W. 18TH COURT
HIALEAH, FL 33012**New Mailing Address:****FEI Number:** 59-1826791**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**PARAJON, FERNANDO
4675 W. 18TH COURT, #205
HIALEAH, FL 33012 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: PARAJON, FERNANDO
Address: 4675 W 18 CT 205
City-St-Zip: HIALEAH, FL 33012**Title:** TD () Delete
Name: PEREZ, TATIANA
Address: 4675 W 18 CT 905
City-St-Zip: HIALEAH, FL 33012**Title:** SD () Delete
Name: ALVAREZ, ENRIQUE
Address: 4675 W 18 CT #1104
City-St-Zip: HIALEAH, FL 33012**Title:** VD (X) Delete
Name: PINEDA, YOLANDA
Address: 4675 W 18 CT #611
City-St-Zip: HIALEAH, FL 33012**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VPD (X) Change () Addition
Name: PEREZ, TATIANA
Address: 4675 W 18 CT 905
City-St-Zip: HIALEAH, FL 33012**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: FERNANDO PARAJON

PD

03/06/2009

Electronic Signature of Signing Officer or Director

Date