

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 21, 2012
Secretary of State

DOCUMENT# 745386

Entity Name: LA ARBOLEDA VILLAGE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**RENOVATIONS PROPERTY MANAGEMENT
6955 NW 77 AVE #407
MIAMI, FL 33166**New Principal Place of Business:****Current Mailing Address:**RENOVATIONS PROPERTY MANAGEMENT
6955 NW 77 AVE #407
MIAMI, FL 33166**New Mailing Address:****FEI Number:** 59-2025615**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RENOVATIONS PROPERTY MANAGEMENT
6955 NW 77 AVE
407
MIAMI, FL 33166 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: T
Name: MEJIA, REYNALDO
Address: 6955 NW 77 AVE #407
City-St-Zip: MIAMI, FL 33166

Title: D
Name: SOSA, MAGALYS
Address: 6955 NW 77 AVE #407
City-St-Zip: MIAMI, FL 33166

Title: P
Name: CRUZ, ALINA-SOLIS
Address: 6955 NW 77 AVE #407
City-St-Zip: MIAMI, FL 33166

Title: D
Name: CASTELLANO, NORMA
Address: 6955 NW 77 AVE #407
City-St-Zip: MIAMI, FL 33166

Title: S
Name: HARDER, MARIA G
Address: 6955 NW 77 AVE #407
City-St-Zip: MIAMI, FL 33166

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: CRUZ ALINA-SOLIS

P

09/21/2012

Electronic Signature of Signing Officer or Director

Date