

**2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 15, 2010**  
**Secretary of State**

DOCUMENT# 746209

**Entity Name:** WESTLANDIA CONDOMINIUM ASSOCIATION INC.**Current Principal Place of Business:**18590 NW 67 AVE.  
200B  
MIAMI, FL 33015 US**New Principal Place of Business:**2530 WEST 78 ST  
BAY # 1  
HIALEAH, FL 33016 US**Current Mailing Address:**P.O. BOX 126370  
HIALEAH, FL 33012 US**New Mailing Address:**P.O. BOX 160698  
HIALEAH, FL 33016 US**FEI Number:** 59-2169277**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**RELIABLE PROPERTY MANAGEMENT SERVICES, INC  
1890 NW 6 AVE., #200B  
MIAMI, FL 33015 US**Name and Address of New Registered Agent:**TRUST MANAGEMENT SERVICES GROUP  
2530 WEST 78 ST  
BAY 1  
HIALEAH, FL 33016 US

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: YORDI TOLEDO

09/15/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PONCE, JUAN  
Address: 2530 WEST 78 ST  
City-St-Zip: HIALEAH, FL 33016

Title: VPD  
Name: GOMEZ, MERCEDES  
Address: 2530 WEST 78 ST  
City-St-Zip: HIALEAH, FL 33016

Title: TD  
Name: SANCHEZ, VICENTE  
Address: 2530 WEST 78 ST  
City-St-Zip: HIALEAH, FL 33016

Title: SD  
Name: URIVAZO, TERESA  
Address: 2530 WEST 78 ST  
City-St-Zip: HIALEAH, FL 33016

Title: D  
Name: BANJO, MARGARITA  
Address: 2530 WEST 78 ST  
City-St-Zip: HIALEAH, FL 33016

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: JUAN PONCE

PD

09/15/2010

Electronic Signature of Signing Officer or Director

Date