

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751103

FILED  
Apr 28, 2012  
Secretary of State

**Entity Name:** BOSTON PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6801 INDIAN CREEK DRIVE  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BLUE LEAF MANAGEMENT  
P.O BOX 190239  
MIAMI BEACH, FL 33119

**New Mailing Address:**

**FEI Number:** 59-2115109      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLUE LEAF LLC  
763 COLLINS AVENUE  
SUITE 303  
MIAMI BEACH, FL 33139 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: D  
Name: VALBUENA, KATHLEEN  
Address: 6801 INDIAN CREEK DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP  
Name: MITCHELL, QUOHNOS  
Address: 6801 INDIAN CREEK DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: P  
Name: MILES, CLAUDINE  
Address: 6801 INDIAN CREEK DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: S  
Name: HEREDIA, LORENA  
Address: 6801 INDIAN CREEK DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

Title: T  
Name: CAMEJO, ROSARIO  
Address: 6801 INDIAN CREEK DRIVE  
City-St-Zip: MIAMI BEACH, FL 33141

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: CLAUDINE MILES

PD

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date