

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752865

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** CARIBBEAN SPRING VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O GOLD PROPERTY MANAGEMENT & ASSOC,  
275 FONTAINEBLEAU BLVD. SUITE 151  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

C/O GOLD PROPERTY MANAGEMENT & ASSOC,  
275 FONTAINEBLEAU BLVD. SUITE 151  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** 59-2098341      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GOLD PROPERTY MANAGEMENT  
275 FOUTAINBLEU BLVD  
SUITE 151  
MIAMI, FL 33172 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: JESUS, URBISTONDO  
Address: 275 FONTAINEBLEAU BLVD. SUITE 151  
City-St-Zip: MIAMI, FL 331772

Title: D  
Name: FERNANDEZ, CARLOS  
Address: 275 FONTAINEBLEAU BLVD. SUITE 151  
City-St-Zip: MIAMI, FL 33172

Title: D  
Name: CACICEDO, ELENA  
Address: 275 FONTAINEBLEAU BLVD. SUITE 151  
City-St-Zip: MIAMI, FL 33172

Title: PD  
Name: NISTAL, JUAN C  
Address: 275 FONTAINEBLEAU BLVD. SUITE 151  
City-St-Zip: MIAMI, FL 33172

Title: VP  
Name: BAER, TOMAS  
Address: 275 FONTAINEBLEAU BLVD. SUITE 151  
City-St-Zip: MIAMI, FL 33172

Title: S  
Name: ECHEVERRIA, ROSALIA  
Address: 275 FONTAINEBLEAU BLVD. SUITE 151  
City-St-Zip: MIAMI, FL 33172

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 NISTAL

P

03/17/2011

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

\_\_\_\_\_  
Date