

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763678

FILED
Apr 30, 2008
Secretary of State

Entity Name: SWEETWATER VILLAS WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11 SW 113 AVENUE
103
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

11 SW 113 AVENUE
103
MIAMI, FL 33174

New Mailing Address:

FEI Number: 59-2808934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRADO, EMIGDIO
11 SW 113 AVE
103
MIAMI, FL 33174 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: TIJERINO, CARLOS
Address: 11 S.W. 113 AVE., #101
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: PRADO, EMIGDIO
Address: 11 S.W. 113 AVE., #103
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: MARTINEZ, MANUEL
Address: 21 SW 113 AVE #106
City-St-Zip: MIAMI, FL 33174

Title: VP () Delete
Name: CORDOVA, GUSTAVO
Address: 13 SW 113 AVE #105
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: GALVEZ, LAZARO
Address: 23 SW 113 AVE #104
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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: EMIGDIO PRADO

TD

04/30/2008

Electronic Signature of Signing Officer or Director

Date