

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768386

FILED
Mar 10, 2009
Secretary of State

Entity Name: THE HORIZONS WEST CONDOMINIUM NO. 10 ASSOCIATION, INC.

Current Principal Place of Business:

8730 SW 133 AVENUE ROAD
MIAMI, FL 33183 US

New Principal Place of Business:

Current Mailing Address:

C/O THE CONTINENTAL GROUP
11981 SW 144 CT., SUITE 201
MIAMI, FL 33186

New Mailing Address:

FEI Number: 59-2267758 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PAIGE, ROBERT ESQ.
9500 S. DADELAND BLVD., STE. 550
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

ASSOCIATION LAW GROUP, P.L
1666 KENNEDY CAUSEWAY
SUITE 305
NORTH BAY VILLAGE, FL 33141 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: BRIDGETTE E. BONET, ESQ.

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALES-JONES, LAURA
Address: 8730 SW 133 AVE, RD #323
City-St-Zip: MIAMI, FL 33183

Title: S () Delete
Name: RODRIGUEZ, LUCIA
Address: 8730 SW 133 AVE., UNIT 419
City-St-Zip: MIAMI, FL 33183

Title: VPT () Delete
Name: XENES, AMANILYS
Address: 8730 SW 133 AVE., UNIT 120
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: DIAZ, MAN A ASUNTA
Address: 8730 SW 133 AVE., UNIT 402
City-St-Zip: MIAMI, FL 33183

Title: D () Delete
Name: PARRU, PARULA O
Address: 8730 SW 133 AVE., UNIT 213
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: DIAZ, MARIA ASUNTA
Address: 8730 SW 133 AVE., UNIT 402
City-St-Zip: MIAMI, FL 33183

Title: D (X) Change () Addition
Name: PARRU, PAULA G
Address: 8730 SW 133 AVE., UNIT 213
City-St-Zip: MIAMI, FL 33183

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: GONZALES JONES LAURA LISA

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date