## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N00000003861

FILED Oct 26, 2006 Secretary of State

Entity Name: VILLA GRANDE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

7915 SW 17 TERR, SUITE A 13876 SW 56TH ST MIAMI, FL 33155

#287

MIAMI, FL 33175

**Current Mailing Address: New Mailing Address:** 

7915 SW 17 TERR, SUITE A 13876 SW 56TH ST MIAMI, FL 33155 #287

MIAMI, FL 33175

FEI Number: 65-1032740 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BORGES, HELEN ACTIVE REAL ESTATE MANAGEMENT ASSOCIATES 5600 SW 135 AVE, STE. 106 MIAMI, FL 33183 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

() Delete MUNOZ, MARIA MUNOZ, MARIA Name: Name:

Address: 7915 SW 17 TERR, SUITE A Address: 6300 SW 138TH CT. UNIT 108

MIAMI, FL 33183 City-St-Zip: MIAMI, FL 33155 City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: CRUZ, JOSE Name: CRUZ, JOSE

Address: 7915 SW 17 TERR, SUITE A Address: 13870 SW 62 ST. UNIT 306 City-St-Zip: MIAMI, FL 33183

MIAMI, FL 33155 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

PEREZ, RAMON Name: Name: 7915 SW 17 TERR, SUITE A Address: Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIA MUNOZ Ρ 10/26/2006