

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003861

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: VILLA GRANDE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

LAND CAP PROPERTY SERVICES INC.  
13800 SW 144 AVE RD  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

LAND CAP PROPERTY SERVICES INC.  
13800 SW 144 AVE RD  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 65-1032740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAND CAP PROPERTY SERVICES, INC.  
13800 SW 144 AVENUE ROAD  
MIAMI, FL 33186 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: P ( ) Delete  
Name: MUNOZ, MARIA  
Address: 6300 SW 138TH CT. UNIT 108  
City-St-Zip: MIAMI, FL 33183

Title: VP ( ) Delete  
Name: RODRIGUEZ, MAYLIN  
Address: 6320 SW 138TH CT. UNIT 102  
City-St-Zip: MIAMI, FL 33183

Title: S ( ) Delete  
Name: RODRIQUEZ, REINZO  
Address: 6320 SW 138TH CT. UNIT 409  
City-St-Zip: MIAMI, FL 33183

Title: SEC (X) Delete  
Name: FERNANDEZ, FERNANDO  
Address: 13850 SW 62 ST. UNIT 105  
City-St-Zip: MIAMI, FL 33183

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MUNOZ, MARIA  
Address: 6300 SW 138TH CT. UNIT 108  
City-St-Zip: MIAMI, FL 33183

Title: SD (X) Change ( ) Addition  
Name: RODRIGUEZ, REINZO  
Address: 6320 SW 138TH CT. UNIT 409  
City-St-Zip: MIAMI, FL 33183

Title: DD (X) Change ( ) Addition  
Name: GROSS, GERALD  
Address: 13870 SW 62 ST. UNIT 102  
City-St-Zip: MIAMI, FL 33183

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: MARIA MUNOZ

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date