

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N00000006706

1. Entity Name  
VALENCIA GARDEN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business  
2200 NW 102 AVE.  
# 5  
MIAMI, FL 33172

Mailing Address  
2200 NW 102 AVE.  
# 5  
MIAMI, FL 33172

FILED  
07 JUL 30 AM 8:42  
CLERK OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07162007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
65-0320276

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERSAUD, ESQ., SAMUEL A  
1450 MADRUGA AVE., #300  
CORAL GABLES, FL 33146

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME GONZALEZ, LAZARO  
STREET ADDRESS 2582 W. 56 STREET UNIT 206  
CITY-ST-ZIP HIALEAH, FL 33016 ☒ Delete

TITLE President  
NAME Fontalvo Hugo  
STREET ADDRESS 2582 W 56 Street 203  
CITY-ST-ZIP Hialeah, FL 33072 ☐ Change ☐ Addition

TITLE DS  
NAME REDONDO, LORENZO  
STREET ADDRESS 2582 W 56 STREET NORTH 202  
CITY-ST-ZIP HIALEAH, FL 33010 ☒ Delete

TITLE Treasurer  
NAME Rodriguez Bernando  
STREET ADDRESS 2582 W 56 Street 201  
CITY-ST-ZIP Hialeah, FL 33072 ☐ Change ☐ Addition

TITLE DT  
NAME AMARAN, MARGARITA  
STREET ADDRESS 2582 W. 56TH ST., #205  
CITY-ST-ZIP HIALEAH, FL 33016 ☐ Delete

500107467535  
08/07/07--01058--028 \*\*\$61.25

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/25/07

28/2