## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00644

FILED Apr 11, 2011 Secretary of State

Entity Name: WESTVIEW CONDOMINIUM ASSOCIATION NO. TEN, INC.

**Current Principal Place of Business:** 

**New Principal Place of Business:** 

C/O TDSUNSHINE PROPERTY MANAGEMENT 4330 WEST BROWARD BLVD., SUITE I

C/O TDSUNSHINE PROPERTY MANAGEMENT 330 SOUTH STATE ROAD 7, SUITE 500

PLANTATION, FL 33317

PLANTATION, FL 33317

**Current Mailing Address:** 

New Mailing Address:

C/O TDSUNSHINE PROPERTY MANAGEMENT P.O. BOX 122015

FORT LAUDERDALE, FL 33312

FEI Number: 59-2377061

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:

TDSUNSHINE PROPERTY MANAGEMENT LLC 4330 WEST BROWARD BLVD., SUITE I PLANTATION, FL 33317 US TDSUNSHINE PROPERTY MANAGEMENT LLC 330 SOUTH STATE ROAD 7, SUITE 500

PLANTATION, FL 33317 ÚS

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: TDSUNSHINE PROPERTY MANAGMENT LLC

04/11/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: VD

Name: MARTINEZ, ARMANDO Address: 1494 N W 97 TERR City-St-Zip: PEMBROKE PINES, FL

Title: DS

 Name:
 HERNANDEZ, PENNY

 Address:
 1448 N.W. 97 TERR.

 City-St-Zip:
 PEMBROKE PINES, FL 33024

City-St-Zip. PEIVIBRORE PINES, FI

Title: DP

Name: NUSSBAUM, ELLEN Address: 1464 NW 97 TERR City-St-Zip: PEMBROKE PINES, FL

Title: TD

Name: KLINE, ELLIOT Address: 1416 N.W. 97 TERR.

City-St-Zip: PEMBROKE PINES, FL 33024

Title: [Name: N

Address: City-St-Zip: MCMULLEN, MICHAEL 1482 NW 97TH TERRACE PEMBROKE PINES, FL 33024

I hereby 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 all other like empowered.

SIGNATURE: PENNY HERNANDEZ

DS

04/11/2011