

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01777

FILED  
Jan 18, 2010  
Secretary of State

**Entity Name:** WESTCHESTER POINT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

995 S.W. 84 AVENUE  
SUITE 100  
MIAMI, FL 33144

**New Principal Place of Business:**

995 S.W. 84 AVENUE  
BOX 100  
MIAMI, FL 33144

**Current Mailing Address:**

995 S.W. 84 AVENUE  
SUITE 100  
MIAMI, FL 33144

**New Mailing Address:**

995 S.W. 84 AVENUE  
BOX 100  
MIAMI, FL 33144

**FEI Number:** 59-2483532

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LASTRES, LOURDES  
995 SW 84TH AVE  
STE 227  
MIAMI, FL 33144 US

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

LASTRES, LOURDES G  
995 SW 84TH AVE  
UNIT 227  
MIAMI, FL 33144 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: LOURDES G. LASTRES, SECRETARY

01/18/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD  
Name: LASTRES, LOURDES G  
Address: 995 SW 84 AVE # 227  
City-St-Zip: MIAMI, FL 33144

Title: TD  
Name: GONZALEZ, MARIA C  
Address: 995 SW 84 AVE #106  
City-St-Zip: MIAMI, FL 33144

Title: PD  
Name: HERNANDEZ, PEDRO L  
Address: 995 SW 84 AVE #402  
City-St-Zip: MIAMI, FL 33144

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: LOURDES G. LASTRES

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01/18/2010

Electronic Signature of Signing Officer or Director

Date