

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000942

FILED  
May 05, 2006  
Secretary of State

**Entity Name:** GABLES ON THE GREEN CONDOMINIUM WEST ASSOCIATION, INC.

**Current Principal Place of Business:**

626 CORAL WAY  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

7154-B SOUTH WEST 47TH STREET  
MIAMI, FL 33155

**New Mailing Address:**

**FEI Number:** 16-1624000      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GLAZER & ASSOCIATES, P.A.  
1920 EAST HALLANDALE BEACH BLVD.  
HALLANDALE, FL 33009 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: DP ( ) Delete  
Name: JUDY, FRIEDMAN  
Address: 626 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPT ( ) Delete  
Name: ROLANDO, PEDRAZA-CRUZ  
Address: 626 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD ( ) Delete  
Name: JUAN, SAGUE  
Address: 626 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

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

Title: DP (X) Change ( ) Addition  
Name: DAVID, RASKOSKY  
Address: 626 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPT (X) Change ( ) Addition  
Name: GUILLERMO, MARTINEZ  
Address: 626 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: SD (X) Change ( ) Addition  
Name: JUDITH, FRIEDMAN  
Address: 626 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

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: DAVID RASKOSKY

PD

05/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date