2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000942

FILED Apr 30, 2003 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

550 BILTMORE WAY, STE. 1210 626 CORAL WAY

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

550 BILTMORE WAY, STE. 1210 626 CORAL WAY

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 16-1624000 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:

GLAZER & ASSOCIATES, P.A. 1920 EAST HALLANDALE BEACH BLVD. HALLANDALE, FL 33009 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:

Floring Circulation of Devictors of Asset

Electronic Signature of Registered Agent

Date
ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition

 Title:
 DP
 () Delete
 Title:
 DP
 (X) Chang

 Name:
 ROGER, OSCAR A
 Name:
 RASKOSKY, DAVID A

 Address:
 550 BILTMORE WAY, STE. 1210
 Address:
 626 CORAL WAY

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:
 CORAL GABLES, FL 33134

Title: DP () Delete Title: VPD (X) Change () Addition Name: CASTRO, MAYREN ROGER Name: FRIEDMAN, JUDY

Address: 550 BILTMORE WAY, STE. 1210 Address: 626 CORAL WAY
City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: DS () Delete Title: STD (X) Change () Addition

 Name:
 HERNRIQUEZ, RICARDO
 Name:
 MARTINEZ, GUILLERMO

 Address:
 550 BILTMORE WAY, STE. 1210
 Address:
 626 CORAL WAY

City-St-Zip: CORAL GABLES, FL 33134 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 Section 119.07(3)(i), 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 04/30/2003