

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2008 08:00 A
Secretary of State

DOCUMENT # N02000005950	
1. Entity Name WEST LANE TOWNHOMES CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business W.L.T.C. ASSOC. INC. 5490 W 22 LN. #7 HIALEAH FL 33016	Mailing Address W.L.T.C. ASSOC. INC. 5490 W 22 LN. #7 HIALEAH FL 33016
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/07)

City & State	City & State
Zip	Country

4. FEI Number 55-0830411	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GARCIA, CARLOS E 5490 W 22 LANE UNIT 1 HIALEAH FL 33016
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7. Name and Address of New Registered Agent 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 is required when re-registering) DATE _____

FILE NOW. FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD GARCIA, CARLOS E 5490 WEST 22ND LANE, UNIT 1 HIALEAH FL 33016 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TD ESTRADA, HONAY 5490 WEST 22ND LANE, UNIT 2 HIALEAH FL 33016 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	SD DOWLING, EDUARDO 1357 W 78TH STREET HIALEAH FL 33014 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D OLIVA, CARLOS 5490 W 22 LN UNIT 5 HIALEAH FL 33016 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D RIVERA, MAYRA 5490 WEST 22ND LANE, UNIT 6 HIALEAH FL 33016 ☐ Delete
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition U00000855043 03/27/08-80032-009 61.25
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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 Section 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: *Carlos E. Garcia* **Carlos E. Garcia** 03/09/08 786-547-9444