2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002214

FILED Feb 13, 2007 Secretary of State

Entity Name: VIA JARDIN CONDOMINIUM ASSOCIATION, INC.

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

330 CLEMATIS STREET 330 CLEMATIS STREET

SUITE 207 SUITE 210

WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 334014602

Current Mailing Address: New Mailing Address:

330 CLEMATIS STREET 330 CLEMATIS STREET

SUITE 207 SUITE 210

WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 334014602

FEI Number: 13-4250501 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:

SCHOFIELD, ARTHUR T BLOEMERS, ANDREW J 330 CLEMATIS STREET 330 CLEMATIS STREET

SUITE 207 SUITE 210

WEST PALM BEACH, FL 33401 US WEST PALM BEACH, FL 334014602 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: ANDREW J. BLOEMERS

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

02/13/2007

Fitle: PD () Delete Title: PD (X) Change () Addition

Name:BLOEMER, ANDREWName:BLOEMERS, ANDREW JAddress:330 CLEMATIS STREET, SUITE 210Address:330 CLEMATIS STREET, SUITE 210City-St-Zip:WEST PALM BEACH, FL 33401City-St-Zip:WEST PALM BEACH, FL 33401

Title: SD () Delete Title: SD (X) Change () Addition

Name: MERRELL, CHRIS Name: CORTES, JOSEPH

Address: 330 CLEMATIS STREET, SUITE 211 Address: 330 CLEMATIS STREET, SUITE 206
City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD () Delete Title: TD (X) Change () Addition

Name: SCHOFIELD, ARTHUR Name: PLEASANTON, ANN M

Address: 330 CLEMATIS STREET, SUITE 207 Address: 330 CLEMATIS STREET, SUITE 208 City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401

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: ANN MARIE PLEASANTON TD 02/13/2007