

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002214

FILED
Feb 13, 2009
Secretary of State

Entity Name: VIA JARDIN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

330 CLEMATIS STREET
SUITE 210
WEST PALM BEACH, FL 334014602

New Principal Place of Business:

330 CLEMATIS STREET
SUITE 205
WEST PALM BEACH, FL 334014602

Current Mailing Address:

330 CLEMATIS STREET
SUITE 210
WEST PALM BEACH, FL 334014602

New Mailing Address:

330 CLEMATIS STREET
SUITE 205
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:

BLOEMERS, ANDREW J
330 CLEMATIS STREET
SUITE 210
WEST PALM BEACH, FL 334014602 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: PD () Delete
Name: BLOEMERS, ANDREW J
Address: 330 CLEMATIS STREET, SUITE 210
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD () Delete
Name: CORTES, JOSEPH
Address: 330 CLEMATIS STREET, SUITE 206
City-St-Zip: WEST PALM BEACH, FL 33401

Title: TD () Delete
Name: PLEASANTON, ANN MARIE
Address: 330 CLEMATIS STREET, SUITE 208
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

02/13/2009

Electronic Signature of Signing Officer or Director

Date