## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT DOCUMENT # N03000006483 1. Entity Name VILLAS AT CARMEL CONDOMINIUM NO. 1 ASSOCIATION, INC.

SIGNATURE:

## **FILED** Apr 02, 2007 8:00 am Secretary of State

04-02-2007 90060 049 \*\*\*\*70.00

CITY-S1-ZIP  CITY-S1-ZIP  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  Delete  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  NAME  NAME  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  NAME  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  NAME  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  NAME  NAME  STREET ADDRESS  CITY-S1-ZIP  TO that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director		ce of Business OFTH AVE., 4TH FLOOR 13173	Mailing Address 730 N.W. 1077H AVE., 4 MIAMI, FL 33173	ITH FLOOR		£	
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20 Country   S. Centificate of Status Desired   St. 75 Applicable	Suite, Apt	203	Suite, Apt. #_etc	3	01092007 CI	hg-NP CR2E037 (12	2/06)
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Signet Address (P.O. Box Number's Not Acceptable)    Signet Address (P.O. Box Number's Not Acceptable)	CATDIO			Name <	PLD Y	n( ·	
MAMI, FL 33131  201 All Combit of Circle. Sub-B 1/O2  City Miami. FL 3/Span4  8. The above named entity submiss this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am Infaniliar with, and accept the chigations of registered agent.  SIGNATURE  SIGNATURE  SUBMISSION AND PROJECT PRO			no	Street Addre	ss (P.O. Box Number is I	Not Accentable)	
8. The above named entity submiss this statement for the purpose of changing its registered office or registered apent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Superior Type   Secretary   Secretary			,,	0.100,7.125.10			
B. The above named entity submits his 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  Filling Fee is \$61.25  Due by May 1, 2007  S. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TILE  DV  MAKE HENDERSON, MERCEDES STREET ADDRESS STREET ADDRESS TOWN 107 AVE  MIAMI, FL 33172  DV  MCPHERSON, GREG MIAMI, FL 33172  DV  MCPHERSON, GREG MIAMI, FL 33172  DV  MCPHERSON, GREG MIAMI, FL 33172  Delete  MIAMI, F	1410 (141), 1 2	30101	_	2014	Ilhambia	Circle Surt	21102
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Trust Fund Contribution.   Added to Fees   Florida Department of State		Signatura, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature rec	uired when reinstating)	DATE	
TITLE NAME NAME HENDERSON, MERCEDES STREET ADDRESS		<del>-</del>	'	· · · · ·			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	DP HENDERSON, MERCEDES 730 NW 107 AVE MIAMI, FL 33172 DV MCPHERSON, GREG 730 NW 107 AVE MIAMI, FL 33172 DST AVILA, MIQUEL 730 NW 107 AVE	Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	an. R. Doni 330 NF 130 grastecio, Fl	100 Drive # 100 33033	hange Addition  Addition  Analyse Addition  Addition  Addition  Addition
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of the corporation of the receiver or prustee empowered to execute his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if 🚶	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP HENDERSON, MERCEDES 730 NW 107 AVE MIAMI, FL 33172 DV MCPHERSON, GREG 730 NW 107 AVE MIAMI, FL 33172 DST AVILA, MIQUEL 730 NW 107 AVE	Delete  Delete  Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP	an. R. Doni 330 NF 130 grastecio, Fl	100 Drive # 100 33033	hange Addition  Addition  Analyse Addition  Addition  Addition  Addition