

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008408

FILED
Apr 20, 2009
Secretary of State

Entity Name: AVIATION BAY VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

800 CRANDON BLVD #102
KEY BISCAYNE, FL 33133

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 490720
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 71-0972213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHELE & ASSOCIATES
800 CRANDON BLVD #102
KEY BISCAYNE, FL 33149 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: PEDRAJA, ANTONIO
Address: 3122 AVIATION AVE
City-St-Zip: MIAMI, FL 33133

Title: TD () Delete
Name: NAMOFF, DAVID
Address: 3124 AVIATION
City-St-Zip: MIAMI, FL 33133

Title: SD () Delete
Name: VALLONE, LORENZO
Address: 3112 AVIATION AVE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAMPBELL, SHANNON
Address: 3116 AVIATION AVE
City-St-Zip: MIAMI, FL 33133

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: SHANNON CAMPBELL

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date