

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 02, 2012
Secretary of State

DOCUMENT# N04000009424

Entity Name: THE PONCE TOWER CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1805 PONCE DE LEON BLVD.
110
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**1805 PONCE DE LEON BLVD.
110
CORAL GABLES, FL 33134**New Mailing Address:**1805 PONCE DE LEON BLVD.
APT 512
CORAL GABLES, FL 33134**FEI Number:** 20-1736194**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**VILLA SALES CENTER
1805 PONCE DE LEON BLVD.
110
CORAL GABLES, FL 33134 US**Name and Address of New Registered Agent:**ROCHE, JOSE A
1805 PONCE DE LEON BLVD.
APT. 512
CORAL GABLES, FL 33134 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: JOSE A ROCHE

04/02/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: ROCHE, JOSE A
Address: 1805 PONCE DE LEON BLVD. APT 512
City-St-Zip: CORAL GABLES, FL 33134

Title: DV
Name: STEVENS, CARMEN
Address: 1805 PONCE DE LEON BLVD SUITE 200
City-St-Zip: CORAL GABLES, FL 33134

Title: DST
Name: INOCENCIO, MIGDALIA
Address: 1805 PONCE DE LEON BLVD. APT 727
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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 all other like empowered.

SIGNATURE: JOSE A. ROCHE

DP

04/02/2012

Electronic Signature of Signing Officer or Director

Date