2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2006 8:00 am Secretary of State

| Mainly Address Mainly | DOCUMENT # N05000002927 1. Entity Name VILLA SAN REMO CONDOMINIUM ASSOCIATION, INC. | | | | | | | | 04 | -03-2006 903 | 367 049 ****6: | 1.25 |
|---|--|----------------------------|---|----------------------|---|--------------------|---|------------------------------------|---|--|--|--|
| Subs. Apr. V. etc. Subs. Apr. V. etc. | 11981 SW 144TH COURT SUITE 201 | | | | 11981 SW 144TH COURT Suite 201 | | | | # | | * | |
| City & State City & State City & City & State City & City & State City & C | 2. Principal P | lace of Busin | ness | 3. Mai | 3. Mailing Address | | | | | | | |
| ZO-2546208 Name and Address of Current Registered Agent S. 15 Application Fee Required F | Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | | 02012006 Ch | ig-NP C | CR2E037 (11/05) | |
| S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KAHN-DRODY, LANI 80 SW 8TH STREET SUITE 1870 MIAMI, FL 33130 City FL Zip Code Florida Department of State Florida Department of State Florida Department of State City Florida Department of State City FL Zip Code Florida Department of State Florida Department of State City Florida Department of State City FL Zip Code Florida Department of State Florida Department of State City Florida Department of State Florida Department of | City & State | θ | | City & State | | | | | | 8 | <u> </u> | |
| KAHN-DRODY, LANI 80 SW 8TH STREET SUITE 1870 MIAMI, FL 33130 B. The above named entity submits this statement for the purpose of changing as registered office or registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligations of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligations of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligations of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligations of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligations of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligation of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligation of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligation of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligation of registered agent, or both, in the State of Rorice. I am termitier with, and accept the obligation of registered agent, or both, in the State of Rorice. I am termitier with, and accept the rorice of Rorice. I am termitier with, and accept the rorice of Rorice of Rorice. I am termitier with, and accept the rorice of Rorice of Rorice. I am termitier with, and accept the Rorice of Rorice. I am termitier with, and accept the Rorice of Rorice. I am termitier with, and accept the Rorice of Rorice. I am termitier with, and accept the Rorice. I am termitier with, and accept the Rorice of Rorice. I am termitier with, and accept the Rorice of Rorice. I am termitier with, and accept the Rorice. I am termiti | Zip | | Country | Zip | | Cou | Country | | 5. Certificate of Sta | atus Desired | | |
| Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) | | 6. Name | and Address of Current | Registere | d Agent | | | | 7. Name and Add | ress of New Regis | stered Agent | |
| B. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature | 80 SW 8TH STREET SUITE 1870 | | | | | | | | | | | |
| 8. The above named entity submits this statement for the purpose of changing its registured office or registered agent, or both, in the State of Florida. I am familiar with, and accept the deligations of registered agent. In the property of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the deligations of registered agent. | | | | | | | City | | | | FL Zip Cod | le |
| Filing Foe is \$61.25 Due by May 1, 2006 9. Election Campelgo Financing Trust Find Contribution. Added to Fees 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 12. Change Addition 12. ADDITIONS/CHANGES 13. ADDITIONS/CHANGES 14. ADDITIONS/CHANGES 15. SAN RESTORMANCE 15. SAN RESTORMANCE 15. SAN RESTORMANCE 16. Change Addition 17. SAN RESTORMANCE 18. ADDITIONS/CHANGES 18. ADDITIONS/ | 8. 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. I am familiar with, and accept | | | | | | | | | | | |
| Trust Fund Contribution. Added to Fees Florida Department of State | | | | | | | | | | | | |
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