

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003730

FILED
Mar 11, 2009
Secretary of State

Entity Name: ARVILLA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1117-1127 EUCLID AVE.
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1300 COLLINS AVE - STE 100
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-2675688

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERMAN, THOMAS G
218 ALMERIA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SHERMAN, THOMAS G
90 ALMERIA AVE
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:

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALL, RICHARD
Address: 1127 EUCLID AVE. 106
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP () Delete
Name: SERBANESCU, MARIANA
Address: 1127 EUCLID AVE. -103
City-St-Zip: MIAMI BEACH, FL 33139

Title: ST () Delete
Name: ARCOS, RODIT
Address: 1117 EUCLID AVE. -202
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: RODIT, ARCOS
Address: 1117 EUCLID AVE. 202
City-St-Zip: MIAMI BEACH, FL 33139

Title: ST (X) Change () Addition
Name: LANDIN, PEDRO J
Address: 1127 EUCLID AVE. -203
City-St-Zip: MIAMI BEACH, FL 33139

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: MELVYN SCHLESSER

MGR

03/11/2009

Electronic Signature of Signing Officer or Director

Date