

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006885

FILED
Aug 09, 2007
Secretary of State

Entity Name: THE VILLAS OF ST. AGNES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3050 BISCAYNE BLVD SUITE 300
MIAMI, FL 33137

New Principal Place of Business:

2200 NW 102 AVE
NO. 5
MIAMI, FL 33172

Current Mailing Address:

3050 BISCAYNE BLVD SUITE 300
MIAMI, FL 33137

New Mailing Address:

2200 NW 102 AVE
NO., 5
MIAMI, FL 33172

FEI Number: 20-3294749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MILLAN-CLEGG, JUSTINA
3050 BISCAYNE BLVD SUITE 300
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

ARTEAGA, CARLOS
2200 NW 102 AVE
NO. 5
MIAMI, FL 33172 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: CARLOS ARTEAGA

08/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: WALLACE, AUNDRA
Address: 3050 BISCAYNE BLVD SUITE 300
City-St-Zip: MIAMI, FL 33137

Title: VSD () Delete
Name: CAREY, RODNEY
Address: 3050 BISCAYNE BLVD SUITE 300
City-St-Zip: MIAMI, FL 33137

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CORTEZ, MARIA
Address: 2200 NW 102 AVE # 5
City-St-Zip: MIAMI, FL 33172

Title: DD (X) Change () Addition
Name: SHAMSTER, LAMBA
Address: 2200 NW 102 AVE # 5
City-St-Zip: MIAMI, FL 33172

Title: DD () Change (X) Addition
Name: CHARLES, MIRENE
Address: 2200 NW 102 AVE # 5
City-St-Zip: MIAMI, FL 33172

Title: DD () Change (X) Addition
Name: WIMES, CASSANDRA
Address: 2200 NW 102 AVE # 5
City-St-Zip: MIAMI, FL 33172

Title: DS () Change (X) Addition
Name: STRACHAN, MONIQUE
Address: 2200 NW 102 AVE # 5
City-St-Zip: MIAMI, FL 33172

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: CARLOS ARTEAGA

CAM

08/09/2007

Electronic Signature of Signing Officer or Director

Date