

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007264

FILED
Apr 02, 2008
Secretary of State

Entity Name: VILASOL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7744 COLLINS AVENUE
OFFICE BOX
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

7744 COLLINS AVENUE
OFFICE BOX
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 20-3341886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILASOL CONDOMINIUM ASSOCIATION
7744 COLLINS AVENUE
OFFICE BOX
MIAMI BEACH, FL 33141 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: D () Delete
Name: TRUYOL, JAVIER
Address: 7744 COLLINS AVE - 8
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: LAWLEY, GREG
Address: 7744 COLLINS AVE - 1
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: ROSSO, PAOLA
Address: 7744 COLLINS AVE - 17
City-St-Zip: MIAMI BEACH, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change () Addition
Name: TRUYOL, JAVIER
Address: 7744 COLLINS AVE - 8
City-St-Zip: MIAMI BEACH, FL 33141

Title: PD (X) Change () Addition
Name: LAWLEY, GREGORY
Address: 7744 COLLINS AVE - 1
City-St-Zip: MIAMI BEACH, FL 33141

Title: VPD (X) Change () Addition
Name: SEGOVIA, KATYA M
Address: 7744 COLLINS AVE - 4
City-St-Zip: MIAMI BEACH, FL 33141

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: GREGORY LAWLEY

PD

04/02/2008

Electronic Signature of Signing Officer or Director

Date