

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007368

FILED  
Jun 25, 2007  
Secretary of State

**Entity Name:** NEW YORK TOWN HOMES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8041 NW 175 ST.  
HIALEAH, FL 33015

**New Principal Place of Business:**

4736 N.W. 167 STREET  
MIAMI GARDENS, FL 33014

**Current Mailing Address:**

8041 NW 175 ST.  
HIALEAH, FL 33015

**New Mailing Address:**

4736 N.W. 167 STREET  
MIAMI GARDENS, FL 33014

**FEI Number:** 13-4337664      **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:**

LANDA-POSADA, MARIA I  
1313 PONCE DE LEON BLVD.  
STE. 301  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

ORELLANA, CESAR  
4736 NW 167 STREET  
MIAMI GARDENS, FL 33014 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: CESAR ORELLANA

06/25/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ORELLANA, CESAR  
Address: 8041 NW 175 ST.  
City-St-Zip: HIALEAH, FL 33015

Title: SD ( ) Delete  
Name: NAVARRO, MERCY T  
Address: 9593 SW 162ND CT  
City-St-Zip: MIAMI, FL 33196

Title: VPT ( ) Delete  
Name: ROMERO, RICARDO  
Address: 9593 SW 162ND CT  
City-St-Zip: MIAMI, FL 33196

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: ORELLANA, CESAR  
Address: 4736 NW 167 STREET  
City-St-Zip: MIAMI GARDENS, FL 33014

Title: D (X) Change ( ) Addition  
Name: SAMPSON, SHAIANE M  
Address: 15800 NW 42 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33054

Title: SVP (X) Change ( ) Addition  
Name: ROMERO, RICARDO  
Address: 9593 SW 162ND CT  
City-St-Zip: MIAMI, FL 33196

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: CESAR ORELLANA

PRES

06/25/2007

Electronic Signature of Signing Officer or Director

Date