## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000009811

Entity Name: ROCA CONDO ASSOCIATION INC

FILED May 03, 2007 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
oarrent i interpar i tace of basi	11000.	i illioipai i lace di Da.	JIII ~ JJ.

5864 W 25 CT UNIT 3 5862 W 25 CT UNIT 2

HIALEAH GARDENS, FL 330164411 HIALEAH GARDENS, FL 330164411

Current Mailing Address: New Mailing Address:

5864 W 25 CT UNIT 3 5862 W 25 CT UNIT 2

HIALEAH GARDENS, FL 330164411 HIALEAH GARDENS, FL 330164411

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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: Name and Address of New Registered Agent:

BATISTA, FRANCISCO MORENO, LUIS A 5864 W 25 CT UNIT 3 5862 W 25 CT UNIT 2

HIALEAH GARDENS, FL 330164411 US HIALEAH GARDENS, FL 330164411 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: LUIS MORENO 05/03/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BATISTA, FRANCISCO
 Name:
 MORENO, LUIS

 Address:
 5864 W 25 CT UNIT 3
 Address:
 5862 W 25 CT UNIT 2

City-St-Zip: HIALEAH GARDENS, FL 330164411 City-St-Zip: HIALEAH GARDENS, FL 330164411

Title: S () Delete Title: () Change () Addition

 Name:
 GONZALEZ, ROBERTO
 Name:

 Address:
 5864 W 25 CT UNIT 3
 Address:

 City-St-Zip:
 HIALEAH GARDENS, FL 330164411
 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LOPEZ, GABRIEL A
 Name:

 Address:
 5864 W 25 CT UNIT 3
 Address:

 City-St-Zip:
 HIALEAH GARDENS, FL 330164411
 City-St-Zip:

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: LUIS MORENO P 05/03/2007