

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2008  
Secretary of State**

DOCUMENT# N05000011752

Entity Name: THE ROADS AT 18 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3400 CORAL WAY 5TH FLOOR  
MIAMI, FL 33145

**New Principal Place of Business:**

**Current Mailing Address:**

3400 CORAL WAY 5TH FLOOR  
MIAMI, FL 33145

**New Mailing Address:**

FEI Number: 20-4515539      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

REGISTERED AGENTS OF FLORIDA, LLC  
100 SE SECOND STREET 29TH FLOOR  
MIAMI, FL 331312130 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: PD ( ) Delete  
Name: VELEZ, LUIS  
Address: 3400 CORAL WAY 5TH FLOOR  
City-St-Zip: MIAMI, FL 33145

Title: VD ( ) Delete  
Name: POSE, MANUEL V  
Address: 3400 CORAL WAY 5TH FLOOR  
City-St-Zip: MIAMI, FL 33145

Title: STD ( ) Delete  
Name: POSE, MANUEL G  
Address: 3400 CORAL WAY 5TH FLOOR  
City-St-Zip: MIAMI, FL 33145

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 VELEZ

PD

04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date