

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 22, 2007**  
**Secretary of State**

DOCUMENT# N05000012112

**Entity Name:** GLEN CREST CONDOMINIUM ASSOCIATION INC.**Current Principal Place of Business:**9240 SUNSET DRIVE, #100  
MIAMI, FL 33173**New Principal Place of Business:**5901 US HWY 19  
SUITE 7Q  
NEW PORT RICHEY, FL 34652**Current Mailing Address:**396 ALHAMBRA CIR  
230  
CORAL GABLES, FL 33134**New Mailing Address:**5901 US HWY 19  
SUITE 7Q  
NEW PORT RICHEY, FL FL**FEI Number:** 86-1160639**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FERNANDEZ VALLE, MARIA  
3750 N.W. 87TH AVENUE  
SUITE 100  
DORAL, FL 33178 US**Name and Address of New Registered Agent:**QUALIFIED PROPERTY MANAGEMENT  
5901 US HWY 19  
SUITE 7Q  
NEW PORT RICHEY, FL 34652 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: MARY A WHITE

08/22/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SANTANA, JONNY  
Address: 9240 SUNSET DRIVE, #100  
City-St-Zip: MIAMI, FL 33173

Title: SD ( ) Delete  
Name: SAGARO, JUAN  
Address: 9240 SUNSET DRIVE, #100  
City-St-Zip: MIAMI, FL 33173

Title: TD ( ) Delete  
Name: RODRIGUEZ, ALBERT  
Address: 9240 SUNSET DRIVE, #100  
City-St-Zip: MIAMI, FL 33173

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

Title: P (X) Change ( ) Addition  
Name: TSANGARIS, PEGGY  
Address: 5901 US HWY 19  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD (X) Change ( ) Addition  
Name: TSANGARIS, STEPHANIE  
Address: 5901 US HWY 19  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD (X) Change ( ) Addition  
Name: KIRKPATRICK, MARK  
Address: 5901 US HWY 19  
City-St-Zip: NEW PORT RICHEY, FL 34652

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: MARY A WHITE

CEO

08/22/2007

Electronic Signature of Signing Officer or Director

Date