

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004089

FILED
Mar 17, 2008
Secretary of State

Entity Name: OAKS AT GRANADA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

815 NW 57TH AVENUE SUITE 202
MIAMI, FL 33126

New Principal Place of Business:

3001 PONCE DE LEON BLVD
SUITE 101
CORAL GABLES, FL 33134

Current Mailing Address:

815 NW 57TH AVENUE SUITE 202
MIAMI, FL 33126

New Mailing Address:

3001 PONCE DE LEON BLVD
SUITE 101
CORAL GABLES, FL 33134

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARRIZABALAGA, JAVIER
815 NW 57TH AVENUE SUITE 202
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

ARRIZABALAGA, JAVIER
3001 PONCE DE LEON BLVD
SUITE 101
CORAL GABLES, FL 33134 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:

03/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ARRIZABALAGA, JAVIER
Address: 815 NW 57TH AVENUE SUITE 202
City-St-Zip: MIAMI, FL 33126

Title: DVP () Delete
Name: RIVAS, JOSE L
Address: 815 NW 57TH AVENUE SUITE 202
City-St-Zip: MIAMI, FL 33126

Title: DS () Delete
Name: ARNAIZ, INAKI P
Address: 815 NW 57TH AVENUE SUITE 202
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ARRIZABALAGA, JAVIER
Address: 3001 PONCE DE LEON BLVD 101
City-St-Zip: CORAL GABLES, FL 33134

Title: DVP (X) Change () Addition
Name: RIVAS, JOSE L
Address: 3001 PONCE DE LEON BLVD 101
City-St-Zip: CORAL GABLES, FL 33134

Title: DS (X) Change () Addition
Name: ARNAIZ, INAKI P
Address: 3001 PONCE DE LEON BLVD 101
City-St-Zip: CORAL GABLES, FL 33134

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: JAVIER ARRIZABALAGA

DP

03/17/2008

Electronic Signature of Signing Officer or Director

Date