

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007531

FILED
Jan 21, 2009
Secretary of State

Entity Name: ST. JOHN VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1324 NW 3RD AVE
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

1324 NW 3RD AVE
MIAMI, FL 33136

New Mailing Address:

FEI Number: 56-2627595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LITTLE, JOHN
LEGAL SERVICES OF GREATER MIAMI
3000 BISCAYNE BLVD STE 500
MIAMI, FL 33137 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: P () Delete
Name: ALEXANDER, DAVID J
Address: 6800 SW 75TH TERR
City-St-Zip: MIAMI, FL 33143

Title: V () Delete
Name: BROWN, HURLETTE R
Address: 830 NE 172ND TERR
City-St-Zip: MIAMI, FL 33162

Title: S () Delete
Name: KELLY, SUSAN
Address: 6911 SW 14TH STREET
City-St-Zip: PEMBROKE PINES, FL 33023

Title: T () Delete
Name: GORDON, ELAINE
Address: 1520 NW 203RD STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: JONES, HENRY E
Address: 2251 NW 93RD TERR.
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: BETTON, LACY
Address: 1622 NW 1ST AVENUE, UNIT 14
City-St-Zip: MIAMI, FL 33136

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:

Title: () Change () Addition
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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: DAVID J. ALEXANDER

P

01/21/2009

Electronic Signature of Signing Officer or Director

Date