

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000012140

FILED
Oct 15, 2007
Secretary of State

Entity Name: VILLAGE AT BRICKELL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

150 SW 10TH STREET
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

150 SW 10TH STREET
MIAMI, FL 33130

New Mailing Address:

270 SW 25TH ROAD
#1
MIAMI, FL 33129

FEI Number: 20-8064781 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

GREENSPOON MARDER, P.A.
100 W CYPRESS CREEK RD SUITE 700
FORT LAUDERDALE, FL 33309 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: GREENSPOON MARDER, P.A.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ALVAREZ, BETHAIDA
Address: 270 SW 25TH ROAD SUITE 1
City-St-Zip: MIAMI, FL 33129

Title: VD () Delete
Name: ALVAREZ, WILLIAM
Address: 270 SW 25TH ROAD SUITE 1
City-St-Zip: MIAMI, FL 33129

Title: S () Delete
Name: LARA, MILLIE
Address: 270 SW 25TH ROAD SUITE 1
City-St-Zip: MIAMI, FL 33129

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: BETHAIDA ALVAREZ

PTD

10/15/2007

Electronic Signature of Signing Officer or Director

Date