

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 08:00 AM
Secretary of State

DOCUMENT # N06572	
1. Entity Name WESTLAND VALLEY CONDOMINIUM, A CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 1672 W. 58TH ST. HIALEAH, FL 33012	Mailing Address 1672 W. 58TH ST. HIALEAH, FL 33012
--	--

DO NOT WRITE IN THIS SPACE



04212008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2738953	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GONZALEZ, F. EVALDO 1672 W 58TH ST HIALEAH, FL 33012

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GONZALEZ, EVALDO 1672 W. 58TH ST. HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, JOSE M. 1660 W. 58TH ST. HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PINERO, MARIO 1668 W. 58TH ST. HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RODRIGUEZ, JOSE 1664 W. 58TH ST. HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	4-21-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date