

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004093

FILED  
Jun 28, 2009  
Secretary of State

Entity Name: ASHLEY B CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

270 SW 25TH ROAD STE 1  
MIAMI, FL 33129

## New Principal Place of Business:

1753 SW 13 ST  
APT # 2  
MIAMI, FL 33145

## Current Mailing Address:

270 SW 25TH ROAD STE 1  
MIAMI, FL 33129

## New Mailing Address:

1753 SW 13 ST  
APT # 2  
MIAMI, FL 33145

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
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:

GREENSPOON MARDER, P.A.  
TRADE CENTRE SOUTH, STE 700  
100 WEST CYPRESS CREEK ROAD  
FORT LAUDERDALE, FL 33309 US

## Name and Address of New Registered Agent:

PAGES, MICHAEL  
1753 SW 13 ST  
APT #2  
MIAMI, FL 33145 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: MICHAEL PAGES

06/28/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PAGES, MICHAEL  
Address: 1753 SW 13 ST, #2  
City-St-Zip: MIAMI, FL 33145

Title: T (X) Change ( ) Addition  
Name: FERNANDEZ, ISABEL  
Address: 1753 SW 13 ST, #1  
City-St-Zip: MIAMI, FL 33145

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: MICHAEL PAGES

P

06/28/2009

Electronic Signature of Signing Officer or Director

Date