2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N07000007816

TI FILED

Oct 29, 2009

Secretary of State

Entity Name: CORAL TOWN PARK VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2189 WEST 60TH STREET SUITE 205 HIALEAH, FL 33016

Current Mailing Address: New Mailing Address:

2189 WEST 60TH STREET SUITE 205 HIALEAH, FL 33016

FEI Number: 16-1745997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOLOMON & FURSHMAN, LLP

1666 KENNEDY CAUSEWAY SUITE 302

NORTH BAY VILLAGE, FL 33141

US

FANO, JOSE E

2189 WEST 60TH STREET

SUITE 205

HIALEAH, FL 33016 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: JOSE E. FANO 10/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

Name: FANO, JOSE E Name:

 Address:
 2189 WEST 60TH STREET SUITE 205
 Address:

 City-St-Zip:
 HIALEAH, FL 33016
 City-St-Zip:

Title: VD () Delete Title: () Change () Addition

 Name:
 FANO, TANIA
 Name:

 Address:
 2189 WEST 60TH STREET SUITE 205
 Address:

 City-St-Zip:
 HIALEAH, FL 33016
 City-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 GARCIA, MAYELIN
 Name:

 Address:
 2189 WEST 60TH STREET SUITE 205
 Address:

 City-St-Zip:
 HIALEAH, FL 33016
 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: JOSE E FANO PD 10/29/2009