2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008085

FILED Apr 30, 2008 Secretary of State

Entity Name: VISCAYA VILLAS CONDOMINIUM ASSOCIATION, INC.

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

2050 CORAL WAY, SUITE 509 1196 SW 22ND TERRACE

MIAMI, FL 33145 MIAMI, FL 33129

Current Mailing Address: New Mailing Address:

2050 CORAL WAY, SUITE 509 1196 SW 22ND TERRACE

MIAMI, FL 33145 MIAMI, FL 33129

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

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

SHERMAN, THOMAS G FINESILVER, AARON S 90 ALMERIA AVE 1201 BRICKELL AVE CORAL GABLES, FL 33134 US 5TH FLOOR

ORAL GABLES, FL 33134 US 51H FLOOR MIAMI, FL 33131 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: AARON FINESILVER 04/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PSTD () Delete Title: D (X) Change () Addition

 Name:
 MARTINEZ, RAMON C
 Name:
 NEAL, JOHN

 Address:
 2640 SW 12 ST
 Address:
 1196 SW 22ND TERRACE

City-St-Zip: MIAMI, FL 33135 City-St-Zip: MIAMI, FL 33129

Title: VPD () Delete Title: D (X) Change () Addition Name: AIZENSTAR, EIBI Name: ACKERMAN, CARLY

 Address:
 2050 CORAL WAY #509
 Address:
 1196 SW 22ND TERRACE

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33129

Title: D () Delete Title: D (X) Change () Addition Name: MARTINEZ, RAMON S Name: FINESILVER, AARON

Address: 2640 SW 12 ST Address: 1198 SW 22ND TERRACE
City-St-Zip: MIAMI, FL 33135 City-St-Zip: MIAMI, FL 33129

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 FINESILVER, KAREN

 Address:
 Address:
 1198 SW 22ND TERRACE

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33129

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: KAREN FINESILVER D 04/30/2008