

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001660

FILED
Apr 27, 2009
Secretary of State

Entity Name: VILLA JARDIN I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O LITTLE HAITI HOUSING ASSOCIATION, INC.
100 NE 84 STREET
MIAMI, FL 33138

New Principal Place of Business:

C/O LITTLE HAITI HOUSING ASSOCIATION, INC.
181 NE 82 STREET
MIAMI, FL 33138

Current Mailing Address:

C/O LITTLE HAITI HOUSING ASSOCIATION, INC.
100 NE 84 STREET
MIAMI, FL 33138

New Mailing Address:

C/O LITTLE HAITI HOUSING ASSOCIATION, INC.
181 NE 82 STREET
MIAMI, FL 33138

FEI Number: 42-1756417

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITTLE, JOHN
3000 BISCAYNE BLVD
SUITE 500
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR () Change (X) Addition
Name: DILLER, SAMUEL
Address: 181 NE 82 STREET
City-St-Zip: MIAMI, FL 33138 US

Title: DIR () Change (X) Addition
Name: HARDER, DAVID
Address: 100 NE 84 STREET
City-St-Zip: MIAMI, FL 33138 US

Title: DIR () Change (X) Addition
Name: MOONVES, MELISSA
Address: 100 NE 84 STREET
City-St-Zip: MIAMI, FL 33138 US

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: DAVID HARDER

DIR

04/27/2009

Electronic Signature of Signing Officer or Director

Date