2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08169

FILED Feb 24, 2009 Secretary of State

Entity Name: CALUSA CLUB VILLAGE CONDOMINIUM BLDG. C WEST ASSOCIATION, INC.

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

8811 SW 132 PLACE MIAMI, FL 33186 US

Current Mailing Address: New Mailing Address:

18001 OLD CUTLER RD. SUITE 521

PALMETTO BAY, FL 33157 US

FEI Number: 59-2647378 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:

DALE, GLASSFORD C 12928 SW 133 CT. SUITE A MIAMI, FL 33186 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:

Clashania Cinnahura of Davietana d Anaut

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 OTEGUI, OLGA B
 Name:
 OTEGUI, OLGA B

 Address:
 8811 SW 132 PLACE APT 103
 Address:
 8811 SW 132 PLACE APT

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

 Title:
 S
 () Delete
 Title:
 VP
 (X) Change () Addition

 Name:
 MEJEIAS, MARIA
 Name:
 MEJIA, MARIA

 Address:
 8811 SW 132 PL
 8811 SW 132 PL

 Address:
 8811 SW 132 PL B05
 Address:
 8811 SW 132 PL

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33186

Title: T () Delete Title: S (X) Change () Addition

 Name:
 WATSON, SONIA
 Name:
 FLOR, HUSSEIN

 Address:
 8811 SW 132 PLACE APT. 108
 Address:
 8811 SW 132 PLACE APT.

Address: 8811 SW 132 PLACE APT. 108 Address: 8811 SW 132 PLACE APT City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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

Name: ZABALA, AUGUSTIN
Address: Address: 8811 SW 132 PLACE APT.

City-St-Zip: City-St-Zip: MIAMI, FL 33186

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: OLGA OTEGUI P. 02/24/2009