## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N15600

FILED Mar 07, 2009 Secretary of State

Entity Name: PATIO GRANDE II TOWNHOMES CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
13358 SW MIAMI, FL	128 STREET 33186				
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
13358 SW MIAMI, FL	128 STREET 33186				
FEI Number:	59-2674951	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
PADNOW, JOSEPH P.A. 13358 SW 128 STREET MIAMI, FL 33186 US			13358 SW 128 STF	PADRON, JOSEPH P.A. 13358 SW 128 STREET MIAMI, FL 33186 US	
The above in the State		submits this statement for the po	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: JOSEPH PADRON				03/07/2009	
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () GARCIA, ZONIA 530 NW 109 AV MIAMI, FL 331	'E #6	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () QUINTANA, ANT 610 N.W. 109 A MIAMI, FL 331	VENUE, #7	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD () MONTOYA, GEI 530 NW 109 AV MIAMI, FL 331	'E #1	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () GARCIA, MARG 520 NW 109 AV MIAMI, FL 331	E #2	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () OSCAR, LUIS 570 N.W. 109 A MIAMI, FL 331		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () PALACIOS, YO' 560 N.W. 109 A MIAMI, FL 331	VENUE, #2	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: ZONIA GARCIA ZG 03/07/2009