

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 20, 2008 8:00 am**  
**Secretary of State**

02-20-2008 90008 028 \*\*\*\*61.25

**DOCUMENT # N18184**

1. Entity Name  
**THE VILLAS OF NARANJA CONDOMINIUM  
ASSOCIATION, INC.**



Principal Place of Business  
**SOUTHWEST 264TH ST. AT 140TH PLACE  
NARANJA, FL 33032**

Mailing Address  
**250 N. BISCAYNE RIVER DR.  
MIAMI, FL 33169**

40028631



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02072008

Chg-NP

CR2E037 (12/06)

4. FEI Number  
**65-0152846**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CRISCO, RONNY  
250 N. BISCAYNE RIVER  
MIAMI, FL 33169**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME CRISCO, RONNY  
STREET ADDRESS 250 N. BISCAYNE RIVER  
CITY-ST-ZIP MIAMI, FL 33169

TITLE VP ☐ Delete  
NAME VARELA, JOSEPH  
STREET ADDRESS 14741 SW 160 ST  
CITY-ST-ZIP MIAMI, FL 33187

TITLE ST ☒ Delete  
NAME HECHLER, JOSE  
STREET ADDRESS 16232 SW 42ND TERRACE  
CITY-ST-ZIP MIAMI, FL 33185

TITLE T ☐ Delete  
NAME JAMES, WALLACE  
STREET ADDRESS 9761 SW 221 ST  
CITY-ST-ZIP MIAMI, FL 33190

TITLE BM ☒ Delete  
NAME FAULKNER, ALFRED  
STREET ADDRESS 26227 SW 141 PL  
CITY-ST-ZIP NARANJA, FL 33032

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME Gonzalez, Melvin  
STREET ADDRESS 18495 south Dixie Hwy. #225  
CITY-ST-ZIP Miami, FL 33157

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME Hechler, Jose  
STREET ADDRESS 16232 SW 42ND Terrace  
CITY-ST-ZIP Miami, FL 33185

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Ronny M. Crisco*  
**Ronny M. Crisco**

2-13-08

305-949-3870