2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008
Secretary of State

DOCUMENT# N36415

Entity Name: THE HOMES OF WEST FLAGLER ESTATES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11365 SW 2ND STREET
603
MIAMI, FL 33174 US

New Principal Place of Business:

Current Mailing Address:

11365 SW 2ND STREET
603
MIAMI, FL 33174 US

New Mailing Address:

FEI Number: 65-0172535 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MENESES, JULIO C
11365 SW 2ND STREET
603
MIAMI, FL 33174 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: PD ( ) Delete
Name: JIMENEZ, OMAR
Address: 11355 SW 2 STREET, #410
City-St-Zip: MIAMI, FL 33174

Title: TD ( ) Delete
Name: TORRES, LEOCADIO R
Address: 11355 SW 2 ST #406
City-St-Zip: MIAMI, FL 33174

Title: VPD ( ) Delete
Name: TIJERINO, ALBERTO
Address: 11351 SW 1 STREET #304
City-St-Zip: MIAMI, FL 33174

Title: SD ( ) Delete
Name: SANTOS, CESAR
Address: 11365 SW 2 STREET #602
City-St-Zip: MIAMI, FL 33174

Title: DD ( ) Delete
Name: DUVAL, LARIOS
Address: 11355 SW 2 ST #404
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JULIO C. MENESES MR. 05/02/2008

Electronic Signature of Signing Officer or Director — Date