

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 23, 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:**11351 SW 1STREET # 301
301
MIAMI, FL 33174 US**Current Mailing Address:**11365 SW 2ND STREET
603
MIAMI, FL 33174 US**New Mailing Address:**11351 SW 1STREET # 301
301
MIAMI, FL 33174 US**FEI Number:** 65-0172535**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****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:**BARBOSA, YELENA
11351 SW 1STREET # 301
301
MIAMI, FL 33174 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: YELENA, BARBOSA

08/23/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: TIJERINO, ALBERTO J
Address: 11351 SW 1STREET # 304
City-St-Zip: MIAMI, FL 33174**Title:** VPD (X) Delete
Name: BARBOSA, YELENA
Address: 11351 SW 1STREET # 301
City-St-Zip: MIAMI, FL 33174**Title:** TD () Delete
Name: TORRES, RENE L
Address: 11355 2ND STREET # 406
City-St-Zip: MIAMI, FL 33174**Title:** SD () Delete
Name: DUVAL, LARIOS
Address: 11355 SW 2ND STREET # 404
City-St-Zip: MIAMI, FL 33174**Title:** DD () Delete
Name: OJEDA, MARCOS
Address: 11355 SW 2ND STREET # 401
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: ALBERTO TIJERINO

PD

08/23/2008

Electronic Signature of Signing Officer or Director

Date