

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37841

FILED
Apr 15, 2009
Secretary of State

Entity Name: COLONIAL VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

20 ALHAMBRA CIRCLE
APT. 12
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

20 ALHAMBRA CIRCLE
APT. 12
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0199208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERNANDEZ-BRAVO, ANA F
20 ALHAMBRA CIRCLE #12
CORAL GABLES, FL 33134 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: SD () Delete
Name: MANNERS, LYDIA
Address: 20 ALHAMBRA CIRCLE #8
City-St-Zip: CORAL GABLES, FL 33134

Title: TD () Delete
Name: RAMIREZ, ROBERT
Address: 3416 ANDERSON RD.
City-St-Zip: CORAL GABLES, FL 33134

Title: PD () Delete
Name: VERGARA, ROBERT
Address: 20 ALHAMBRA CIRCLE #7
City-St-Zip: CORAL GABLES, FL 33134

Title: VD () Delete
Name: HERNANDEZ-BRAVO, ANA F
Address: 20 ALHAMBRA CIR, # 12
City-St-Zip: CORAL GABLES, FL 33134

Title: VD (X) Delete
Name: VENEGAS, JOSE
Address: 20 ALAHAMBRA CIRCLE #10
City-St-Zip: CORAL GABLES, FL 33134

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: ANA F. HERNANDEZ-BRAVO

VD

04/15/2009

Electronic Signature of Signing Officer or Director

Date