

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37841

**FILED**  
**Apr 22, 2011**  
**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  
Name: MANNERS, LYDIA  
Address: 20 ALHAMBRA CIRCLE #8  
City-St-Zip: CORAL GABLES, FL 33134

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: ANA F. HERNANDEZ-BRAVO

VD

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date