

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40103

FILED  
Feb 02, 2009  
Secretary of State

**Entity Name:** VILLAGE WEST WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9000 SW 152ND ST.  
#102  
MIAMI, FL 33157 US

**New Principal Place of Business:**

**Current Mailing Address:**

9000 SW 152ND ST.  
#102  
MIAMI, FL 33157 US

**New Mailing Address:**

**FEI Number:** 65-0244572      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCOTT, F. JOSEPH  
9000 SW 152ND STREET  
#102  
MIAMI, FL 33157 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: LAU, BARRY  
Address: 8009 NW 29TH ST  
City-St-Zip: MIAMI, FL

Title: VPD ( ) Delete  
Name: DUARTE, MANUEL  
Address: 2917 SN 82AVE  
City-St-Zip: MIAMI, FL 33122

Title: SD ( ) Delete  
Name: COBO, PERNANDO  
Address: 8015 NW 29ST  
City-St-Zip: MIAMI, FL 33122

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LAU, BARRY  
Address: 8009 NW 29TH ST  
City-St-Zip: MIAMI, FL 33122

Title: VPD (X) Change ( ) Addition  
Name: DUARTE, MANUEL  
Address: 2917 NW 82AVE  
City-St-Zip: MIAMI, FL 33122

Title: STD (X) Change ( ) Addition  
Name: COBO, PERNANDO  
Address: 8015 NW 29ST  
City-St-Zip: MIAMI, FL 33122

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: BARRY LAU

P

02/02/2009

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

\_\_\_\_\_  
Date