

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90182 014 ****61.25

DOCUMENT # N43539 1. Entity Name VILLA TOSCANA AT CORAL GABLES, INC.					
Principal Place of Business 261 NAVARRE AVENUE CORAL GABLES, FL 33134			Mailing Address 145 MADEIRA AVENUE 206 CORAL GABLES, FL 33134		
2. Principal Place of Business - No P.O. Box # <i>The same as above</i>		3. Mailing Address <i>The same as above</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0328014	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERNANDEZ, SUSANA 145 MADEIRA AVENUE 206 CORAL GABLES, FL 33134				7. Name and Address of New Registered Agent Name: Susana Fernandez Street Address (P.O. Box Number is Not Acceptable): 145 Madeira Avenue Suite: 206 City: Coral Gables FL Zip Code: 33134	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <i>[Signature]</i> President <i>[Signature]</i>				DATE: 3-26-07	
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ABRAHAM, JAMES 261 NAVARRE AVENUE #310 CORAL GABLES, FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Sergio Leymarie 261 Navarre Avenue #305 Coral Gables, FL 33134	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP STONE, HOWARD 261 NAVARRE AVE. #205 CORAL GABLES, FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP. James Abraham 261 Navarre Avenue #310 Coral Gables, FL 33134	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S VALDIVIA, RUBEN 261 NAVARRE AVE. #308 CORAL GABLES, FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Susana Beckincourt 261 Navarre Ave. #101 Coral Gables, FL 33134	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T LEYMARIE, SERGIO 261 NAVARRE AVE #305 CORAL GABLES, FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Ruben Valdivia 261 Navarre Ave. #308 Coral Gables, FL 33134	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Howard Stone 261 Navarre Ave. #205 Coral Gables, FL 33134	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Brian Korney 261 Navarre Ave. #300 Coral Gables, FL 33134	☒ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> President				DATE: 3-26-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	