2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 08, 2012
Secretary of State

DOCUMENT# N43539

Entity Name: VILLA TOSCANA AT CORAL GABLES, INC.

Current Principal Place of Business:

261 NAVARRE AVENUE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14-1857
CORAL GABLES, FL 33114

New Mailing Address:

FEI Number: 65-0328014 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHELTON, SUSANA
5258 SW 8 ST
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SHELTON, SUSANA
6488 SW 24 ST
MIAMI, FL 33155 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: _____ 08/08/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: LEYMARIE, SERGIO
Address: 261 NAVARRE AVENUE #305
City-St-Zip: CORAL GABLES, FL 33134

Title: T
Name: GONZALEZ, OMAR
Address: 6301 COLLINS AVE #1806
City-St-Zip: MIAMI BEACH, FL 33141

Title: S
Name: ECHEVARRIA, MANUEL
Address: 261 NAVARRE AVE. #309
City-St-Zip: CORAL GABLES, FL 33134

Title: VP
Name: DAWKINS, TANYA
Address: 261 NAVARRE AVE #311
City-St-Zip: CORAL GABLES, FL 33134

Title: D
Name: MAZZEI, CLAUDIO
Address: 261 NAVARRE AVE #302
City-St-Zip: MIAMI, 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: SERGIO LEYMARIE P 08/08/2012
Electronic Signature of Signing Officer or Director — Date