

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 03, 2011
Secretary of State

Entity Name: VILLA REAL CONDOMINIUM NO. 4 ASSOCIATION, INC.

Current Principal Place of Business:

C/O MANHATTAN PROPERTY MANAGEMENT, INC.
11060 S.W. 88TH ST., STE 8
MIAMI, FL 33176 US

New Principal Place of Business:

C/O C.B. PROPERTY SERVICES, INC.
8630 SW 149 AVENUE, CH OFFICE
MIAMI, FL 33193 US

Current Mailing Address:

C/O MANHATTAN PROPERTY MANAGEMENT, INC.
11060 S.W. 88TH ST., STE 8
MIAMI, FL 33176 US

New Mailing Address:

C/O C.B. PROPERTY SERVICES, INC.
P.O. BOX 961569
MIAMI, FL 33296 US

FEI Number: 65-0723743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIL, LILLIE
11060 SW 88 STREET, SUITE 8
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

PARISER, BRIAN ESQ
DADELAND CENTRE, 9155 SO. DADELAND BLVD.
PENTHOUSE 1 - SUITE 1718
MIAMI, FL 33156 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: BRIAN W. PARISER

02/03/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ZAMBRANO, EDGARD
Address: 8630 SW 149 AVENUE, CH OFFICE
City-St-Zip: MIAMI, FL 33193

Title: SD
Name: GOMEZ, COSETTE
Address: 8630 SW 149 AVENUE, CH OFFICE
City-St-Zip: MIAMI, FL 33193

Title: TD
Name: AMPIE, ELISEO
Address: 8630 SW 149 AVENUE, CH OFFICE
City-St-Zip: MIAMI, FL 33193 US

Title: D
Name: DE JESUS CARTAS, TERESITA
Address: 8630 SW 149 AVENUE, CH OFFICE
City-St-Zip: MIAMI, FL 33193 US

Title: D
Name: SANCHEZ, JOSE
Address: 8630 SW 149 AVENUE, CH OFFICE
City-St-Zip: MIAMI, FL 33193 US

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: ELISEO AMPIE

TREA

02/03/2011

Electronic Signature of Signing Officer or Director

Date