FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9700002756

CHRISTY'S PLACE VILLAS & TOWNHOMES CONDOMINIUM A SSOCIATION, INC.

Principal Place of Business											
13800 SI	N 8TH	STREET	SUITE	38							

FILED Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90085 013 *****8.75 04-01-1999 90085 014 ****61.25

Principal Place	e of Business	Maning Address			l				
13800 SW 8TH STREET SUITE 381 MIAMI FL 33174 13800 SW 8TH STREET SUITE 381 MIAMI FL 33174									
2. Principal P	lace of Business	2a. Mailing Address		<u> </u>		3. Date Incorporated or Qualifed			
21		26			[05/14/1997			
Suite, Apt.	#, etc	Suite, Apt. #, etc				4. FEI Number		Ap	olied For
22	•	27			Į	65-0845864		Not	Applicable
City & Stat	e	City & State	•			5. Certifcate of Status Desired	8 0	\$8.75 ∧	
23		28				Odrandate of Otolog Doorlog		Fee Re	quired
Zip	Country	Zip	Count	y		6. Election Campaign Financing		\$5.00	
24 .	25	29 3	0			Trust Fund Contribution		Added to	Fees
	9. Name and Address of Current	Registered Agent		-		10. Name and Address of New F	Registered	Agent	
	•		8	1 Nam	ne				
VALIENTE, MARIA		8	2 Stree	et Addres	s (P.O. Box Number is Not Accepta	able)			
1 13800 SW 8TH STREET SUITE 381		8	3						
			8	4 City			· E1	85 Zip C	ode .
				_L			FL	-	l-t-rod
S	to the provisions of Sections 617.0502 registered agent, or both, in the State or rm familiar with, and accept the obligation	Florida. Such change was aut ons of, Section 617.0503, Florid	horized b	y the co	rporation'	s board of directors. I hereby accept	ot the appoi	intment as rec	jistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Ag	ent signatu	w beriuper en	hen reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	D	☐ DELETE	1.1 TITLE			•		Change	Addition
NAME .	VALIENTE, MARIA		1.2 NAME	•		•			
STREET ADDRESS	13800 SW 8TH STREET SUITE 3	81	1.3 STRE	ET ADDRES	s s				,
CITY-ST-ZIP	MIAMI FL 33174		1.4 CITY-	ST-ZIP					
TITLE	D	Ú DELETE	2.1 TITLE			•		Change	☐ Addition
NAME	VALIENTE, ALEJANDRO		2.2 NAME	•					1
STREET ADDRESS	13800 SW 8TH STREET SUITE 3	81	. 2.3 STRE	ET ADORES	SS	, #=			
CITY-ST-ZIP	MIAMI FL 33174		2.4 CITY	-ST-ZIP					
TITLE	D	☐ DELETE	3.1 TITLE	:				Change	☐ Addition
NAME	COTO, ALEXANDER		3.2 NAME	<u> </u>					
STREET ADDRESS	13800 SW 8TH STREET SUITE 3	81	3.3 STRE	ET ADDRES	SS				
CITY-ST-ZIP	MIAMI FL 33174		3.4. CITY	-ST-ZIP				<u> </u>	
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NAM	E					
STREET ADDRESS			4.3 STRE	ET ADDRES	ss				
CITY-ST-ZIP	· · ·	<u> </u>	4.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition
NAME			5.2 NAM	Ē		•			1
STREET ADDRESS	· ·		5.3 STRE	ET ADORES	SS	•			
CITY-ST-ZIP			5.4 CITY-				•		
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition \
NAME			6.2 NAME						. [
STREET ADDRESS			6.3 STRE	ET ADDRE	SS	•			J

I hereby certify that the information supplied with this filing does not qualify for he exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual 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 specure this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or other attachment with an address, with all other like empowered. 14. I hereby certify that the information

SIGNATURE:

CITY-ST-ZIP