2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

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FILED Mar 08, 2007 8:00 am Secretary of State 03-08-2007 90001 019 ****61.25

DOCUMENT # N97000003115

1. Entity Name SEGOVIA VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Plac 6081-6121 HIALEAH, FL 2. Principal P Suite, Apt.	WEST 24TH / 33016 Place of Busine #, etc.		2011 HIALE 3. Maili	Mailing Address 2011 WEST 62 STREET HIALEAH, FL 33016 3. Mailing Address Suite, Apt. #, etc. City & State				40031308 02262007 Chg-NP CR2E037 (12/06) 4. FEI Number Applied For Not Applied For Not Applicable				
Zip					ntry		Fee			\$8.75 Add Fee Require	ditional	
6. Name and Address of Current Registered Agent AMERICAN MANAGEMENT & REALTY, INC. 2011 W 62 ST HIALEAH, FL 33016 8. The above named entity submits this statement for the purpose of changing its regi						7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code istered office or registered agent, or both, in the State of Florida. am familiar with, and accept						
the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filling Fee Is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to												
Due by May 1, 2007 Trust Fund Contrib					ontributio	on.	Added to Fees Florida Department of State					
TITLE , NAME STREET ADDRESS CITY-ST-ZIP	PD ARCA, OL 6121 W 24 HIALEAH,	TH AVE #103	DIRECTORS	□ Delete	•	T ADDRESS ST-ZIP			ANGES TO OFFIC		DIRECTORS IN Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		A, JUAN ITH AVE #210 FL 33016		☐ Delete		T ADDRESS ST-ZIP	TREA Juan 6121 Hia	Herrera wzuma leah. Fl	+ Decret ve #210 33016	ary	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	LAZARO ITH AVE #104 FL 33016		⊠ Delete		T ADDRESS ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		LO, JAVIER ITH AVE #206 FL 33016		S elete		T ADDRESS ST-ZIP					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6081 W 24	NO, LYDIA ITH AVE #202 FL 33016		Delete		t address St-zip					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		T ADDRESS ST-ZIP					☐ 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:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305 551-9820