

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004682

FILED
Apr 30, 2007
Secretary of State

Entity Name: FLAMINGO PARK VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1017 MERIDIAN AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

918 OCEAN DRIVE
SUITE # 207
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0797905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLETZENBAUER, HERI
918 OCEAN DR. #207
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GARCES, CARLOS
Address: 1017 MERIDIAN AVE UNIT G
City-St-Zip: MIAMI BEACH, FL 33139

Title: VPD () Delete
Name: PRYEL, EILEEN
Address: 1017 MERIDIAN AVE UNIT E
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: BEAK, CATHERINE
Address: 1017 MERIDIAN AVE UNIT D
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ENAMA, RAY
Address: 1017 MERIDIAN AVE UNIT C
City-St-Zip: MIAMI BEACH, FL 33139

Title: T (X) Change () Addition
Name: O'CONNOR, PATRICK
Address: 1017 MERIDIAN AVE UNIT A
City-St-Zip: MIAMI BEACH, FL 33139

Title: S (X) Change () Addition
Name: BEAK, CATHERINE
Address: 1017 MERIDIAN AVE UNIT D
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ENAMA RAY

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date