

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004682

FILED
Apr 22, 2009
Secretary of State

Entity Name: FLAMINGO PARK VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1017 MERIDIAN AVE UNIT C
MIAMI BEACH, FL 33139

New Principal Place of Business:

918 OCEAN DRIVE
207
MIAMI BEACH, FL 33139

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 DRIVE
207
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

CUEVAS & ORTIZ, P.A.
536 BILTMORE WAY
CORAL GABLES, FL 33134 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: ANDREW CUEVAS

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: BEAK, CATHERINE
Address: 19630 RALSTON STREET
City-St-Zip: ORLANDO, FL 32833

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: RAY ENAMA

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date