

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005289

FILED
Mar 19, 2009
Secretary of State

Entity Name: VISTA ALEGRE TOWNHOMES VILLAS STAGE III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13250 SW 135 AVE
MIAMI, FL 33186 US

New Principal Place of Business:

EXCELLENT PROPERTY MANAGEMENT
6955 NW 77 AVE. STE. 401
MIAMI, FL 33166 US

Current Mailing Address:

13250 SW 135 AVE
MIAMI, FL 33186 US

New Mailing Address:

EXCELLENT PROPERTY MANAGEMENT
6955 NW 77 AVE. STE. 401
MIAMI, FL 33166 US

FEI Number: 65-0799733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALBERG, MICHAEL ESQ
10800 BISCAYNE BLVD
SUITE 988
MIAMI, FL 33161 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: MCLEOD, NADIA
Address: 13407 SW 154 ST #2308
City-St-Zip: MIAMI, FL 33177

Title: VD () Delete
Name: BENCOMO, SUSAN
Address: 15421 SW 133 PL #908
City-St-Zip: MIAMI, FL 33177

Title: SD (X) Delete
Name: GARRIDO, JORGE
Address: 13447 SW 154 ST #2208
City-St-Zip: MIAMI, FL 33177

Title: TD (X) Delete
Name: CABRERA, JAIME
Address: 13447 SW 154 ST #2202
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: NADIA MCLEOD

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date