

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738519

Entity Name: THE VILLAS OF MADEIRA HOMEOWNERS ASSOC. INC.**Current Principal Place of Business:**C/O COURTESY PROPERTY MANAGEMENT
13250 SW 135 AVENUE
MIAMI, FL 33186**Current Mailing Address:**C/O COURTESY PROPERTY MANAGEMENT
13250 SW 135 AVENUE
MIAMI, FL 33186 US**FEI Number:** 59-2070936**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**SRLD
201 ALHAMBRA CIRCLE
SUITE 1102
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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	TD
Name	JIMENEZ, ROSALIA MRS
Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
City-State-Zip:	MIAMI FL 33186

Title	PD
Name	VARGAS, JOSE MR
Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
City-State-Zip:	MIAMI FL 33186

Title	VPD
Name	ALVAREZ, GLORIA MS
Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
City-State-Zip:	MIAMI FL 33186

Title	SD
Name	ALVAREZ, ESTEBAN MR
Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
City-State-Zip:	MIAMI FL 33186

Title	D
Name	HERNANDEZ, NORMAN MR
Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
City-State-Zip:	MIAMI FL 33186

I hereby 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 all other like empowered.

SIGNATURE: JOSE VARGAS

PRESIDENT

03/16/2017

Electronic Signature of Signing Officer/Director Detail_____
Date