

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743893

FILED
Mar 14, 2009
Secretary of State

Entity Name: TOP OF THE MILE, INC.

Current Principal Place of Business:

C/O UNITED COMMUNITY MGT. CORP
11784 W SAMPLE RD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

C/O UNITED COMMUNITY MGT. CORP
11784 W SAMPLE RD #103
CORAL SPRINGS, FL 33065

Current Mailing Address:

C/O UNITED COMMUNITY MGT. CORP
11784 W SAMPLE RD
CORAL SPRINGS, FL 33065

New Mailing Address:

C/O UNITED COMMUNITY MGT. CORP
11784 W SAMPLE RD #103
CORAL SPRINGS, FL 33065

FEI Number: 59-1859047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED COMMUNITY MANAGEMENT CORP
11784 W SAMPLE RD
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

UNITED COMMUNITY MANAGEMENT CORP
11784 W SAMPLE RD
#103
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL

03/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FELDMAN, BARBARA
Address: 4013 N. OCEAN AVE. #105
City-St-Zip: LAUDERDALE BY TH SEA, FL 33308

Title: VP () Delete
Name: KAUFMEN, ROBERT
Address: 4013 N OCEAN BLVD., #107
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

Title: SDTD () Delete
Name: PABON, DAVID
Address: 4013 NORTH OCEAN DR # 308
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: KAUFMEN, ROBERT
Address: 4013 N OCEAN BLVD., #107
City-St-Zip: LAUDERDALE BY THE SEA, FL 33308

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: MARY LOU PALMER

AGT

03/14/2009

Electronic Signature of Signing Officer or Director

Date