## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL RÉPORT

## Feb 12, 2007 8:00 am Secretary of State **DOCUMENT #754684** 02-12-2007 90091 001 \*\*\*\*61.25 SHADYWOOD VILLAS HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 40014500 C/O MIAMI MANAGEMENT INC. C/O MIAMI MANAGEMENT INC 14275 SW 142 AVE 14275 SW 142 AVE MIAMI, FL 33186 MIAMI, FL 33186 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042007 Chg-NP CR2E037 (12/06) 4. FEI Number 59-2022444 City & State City & State Applied For Not Applicable Zip Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TRIAY, CARLOS A Street Address (P.O. Box Number is Not Acceptable) 3750 NW 87 AVE **SUITE 100 DORAL, FL 33178** City Zip Code FΙ 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE \_ (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title it applicable **\$5.00** May Be Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE TITLE Delete D HELTMAN, ALFRED NAME NAME 11742 SW 92 TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33186 CITY-ST-ZIP ÐSD SD TITLE Delete TITLE ☐ Addition ZWEIG, ILENE NAME NAME 11738 SW 92 TERR STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI, FL 33186 CITY-ST-ZIP Addition Delete TITLE ☐ Change TITLE Espinosa Aliette 11815 sw 91 Terrace Miami, FL 33186 NAME VELASCO, PASTOR STREET ADDRESS 11715 SW 92 TERR STREET ADORESS MIAMI, FL CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ Delete TITLE Briz, Salvador 11787 SW 92 Terrace RIMLAND, ELIAS NAME NAME STREET ADDRESS 11750 SW 92 TERRACE STREET ADDRESS MIAMI, FL 33186 CITY-ST-ZIP 33186 CITY-ST-ZIP Miami, FL Delete ☐ Change ■ Addition TITLE TITLE KALSIC, CARMEN NAME STREET ADDRESS 11720 SW 91 TER STREET ADDRESS MIAMI, FL 33186 CITY-ST-ZIP CITY-ST-ZIP D 160 NPID Change ☐ Addition ☐ Delete TITLE TITLE PASCUAL, ENRIQUE NAME NAME 9134 SW 118 CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP MIAMI, FL 33186 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report of supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an afactment with an address, with all other like empowered.

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR PRESIDENT

SIGNATURE:

**FILED**