

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754684

FILED
Mar 04, 2009
Secretary of State

Entity Name: SHADYWOOD VILLAS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT INC
14275 SW 142 AVE
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI MANAGEMENT INC
14275 SW 142 AVE
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 59-2022444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIAI, CARLOS A
3750 NW 87 AVE
SUITE 100
DORAL, FL 33178 US

Name and Address of New Registered Agent:

TRIAI, CARLOS A
2301 N.W. 87TH AVENUE
SUITE 501
DORAL, FL 33172 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

03/04/2009

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HELTMAN, ALFRED
Address: 11742 SW 92 TERR
City-St-Zip: MIAMI, FL 33186

Title: SD () Delete
Name: ZWEIG, ILENE
Address: 11738 SW 92 TERR
City-St-Zip: MIAMI, FL 33186

Title: PD () Delete
Name: VELASCO, PASTOR
Address: 11715 SW 92 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: TD () Delete
Name: RIMLAND, ELIAS
Address: 11750 SW 92 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: BRIZ, SALVADOR
Address: 11787 SW 92 TERRACE
City-St-Zip: MIAMI, FL 33186

Title: VPD () Delete
Name: PASCUAL, ENRIQUE
Address: 9134 SW 118 CT
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HELTMAN, ALFRED
Address: C/O MMI 14275 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33186

Title: SD (X) Change () Addition
Name: ZWEIG, ILENE
Address: C/O MMI 14275 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33186

Title: PD (X) Change () Addition
Name: VELASCO, PASTOR
Address: C/O MMI 14275 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33186

Title: TD (X) Change () Addition
Name: RIMLAND, ELIAS
Address: C/O MMI 14275 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33186

Title: D (X) Change () Addition
Name: ESPINOSA, ALIETTE
Address: C/O MMI 14275 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33186

Title: VPD (X) Change () Addition
Name: PASCUAL, ENRIQUE
Address: C/O MMI 14275 SW 142 AVENUE
City-St-Zip: MIAMI, FL 33186

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: PASTOR VELASCO

Electronic Signature of Signing Officer or Director

P

03/04/2009

Date