2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755736

FILED Apr 23, 2009 Secretary of State

Entity Name: PATIO VILLAGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

11530 STATE ROAD 84 DAVIE, FL 33325 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 551390 DAVIE, FL 33355

OFFICERS AND DIRECTORS:

FEI Number: 59-2046374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEST BROWARD COMMUNITY MANAGEMENT, INC. 11530 STATE ROAD 84 DAVIE, FL 33325 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

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:P () DeleteTitle:P (X) Change () AdditionName:RUBIN, SHELDONName:LORENZ, KLAUSAddress:16832 PATIO VILLAGE LNAddress:312 PATIO VILLAGE TERRACE

City-St-Zip: FORT LAUDERDALE, FL 33326 City-St-Zip: WESTON, FL 33326

Title: VP () Delete Title: VP (X) Change () Addition
Name: PASSANNANTE, LUCILLE Name: STEINBUCK, HENRY
Address: 517 PATIO VILLAGE WAY Address: 306 PATIO VILLAGE TERRACE

City-St-Zip: FORT LAUDERDALE, FL 33326 City-St-Zip: WESTON, FL 33326

Title: S () Delete Title: S (X) Change () Addition Name: COLLINS, FRANCES Name: ENGLERT, JOHN

Address: 510 PATIO VILLAGE WAY Address: 360 PATIO VILLAGE TERRACE

City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326

Title: T () Delete Title: D (X) Change () Addition Name: HAWKINS, MAGDA Name: CHIRON, LOUIS

Address: 16814 PATIO VILLAGE LN Address: 522 PATIO VILLAGE WAY
City-St-Zip: FORT LAUDERDALE, FL 33326 City-St-Zip: WESTON, FL 33326

Title: D () Delete Title: T (X) Change () Addition

Name: FELDT, MARIACRISTINA V Name: BUSCA, ARTURO
Address: 518 VILLAGE LAKE DR Address: 524 VILLAGE LAKE DR
City-St-Zip: FORT LAUDERDALE, FL 33326 City-St-Zip: WESTON, FL 33326

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: KLAUS LORENZ P 04/23/2009