

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768390

FILED
Jan 14, 2009
Secretary of State

Entity Name: MORADA BAY PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6500 COWPON RD
301
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

6500 COWPON RD
301
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 65-0028504

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEIL, DANIEL M.
6500 COWPEN RD
SUITE 301
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ADAME, GLENN
Address: 18034 SW 83 CT
City-St-Zip: MIAMI, FL 33157

Title: SD () Delete
Name: KEIL, DANIEL M.
Address: 6500 COWPEN RD, SUITE 301
City-St-Zip: MIAMI LAKES, FL 33014

Title: TD () Delete
Name: DORITY, BETTY A
Address: 75100 OVERSEAS HIGHWAY
City-St-Zip: ISLAMORADA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ADAMO, GLENN
Address: 18034 SW 83 CT
City-St-Zip: MIAMI, FL 33157

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

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: GLENN ADAMO

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date