

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003923

FILED
Feb 21, 2009
Secretary of State

Entity Name: RAVELLO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5055 SW 171ST AVENUE
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

5055 SW 171ST AVENUE
MIRAMAR, FL 33027

New Mailing Address:

C/O CASTLE MANAGEMENT
PO BOX 559009
FORT LAUDERDALE, FL 33355

FEI Number: 65-1026674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 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: TD () Delete
Name: TAYLOR, ROWAN
Address: 5087 SW 162ND AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: VD () Delete
Name: GARCIA, VIDAL
Address: 4936 SW 162ND AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: PD () Delete
Name: PI LARA, RAYMOND
Address: 16120 SW 51ST STREET
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: FEENEY, DANIEL
Address: 50720SW 164TH AVE
City-St-Zip: MIRAMAR, FL 33027

Title: SD () Delete
Name: JOHNSON, ANDREW
Address: 16212 SW 49TH COURT
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: RADLEIN, LANCELOT
Address: 5094 SW 161ST AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: VD (X) Change () Addition
Name: ROBERTSON, CHARLES
Address: 4931 SW 161 AVENUE
City-St-Zip: MIRAMAR, FL 33027

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

Title: D (X) Change () Addition
Name: ESCOBAR, DIANA
Address: 5084 SW 164TH AVE
City-St-Zip: MIRAMAR, FL 33027

Title: SD (X) Change () Addition
Name: TIONG, ROSE
Address: 5036 SW 162 AVE
City-St-Zip: MIRAMAR, FL 33027

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: ROBERT A DONNELLY

MGR

02/21/2009

Electronic Signature of Signing Officer or Director

Date