2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007941

FILED Apr 20, 2009 Secretary of State

Entity Name: FLORENZA AT MIRASOL PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
21045 COI	MANAGEME MMERCIAL TE TON, FL 3348	RAIL					
Current Mailing Address:				New Mailing Address:			
21045 COI	MANAGEME MMERCIAL TF TON, FL 3348	RAIL					
FEI Number:	65-1058345	FEI Number Applied	For () FEI Nur	nber Not Appl	icable ()	Certificate of Sta	atus Desired (X)
Name and	Address of 0	Current Registered A	Agent:	Name and	Address of N	New Registered	d Agent:
C/O/ LANC 21045 COI BOCA RA The above		RAIL	nt for the purpose o	f changing i	ts registered o	office or register	ed agent, or both,
	e of Florida. 						
SIGNATUF		nic Signature of Regis	stered Agent			 Date	
OFFICERS AND DIRECTORS:				ADDITION	IS/CHANGES		AND DIRECTORS
Γitle:	Р () Delete		Title:	() Change ()Additi	on
Name: Address:	LUSTRIN, BAR 107 VIA FLORI PALM BEACH			Name: Address: City-St-Zip:	,	,	
Name: Address: City-St-Zip: Title: Name: Address:	107 VIA FLORI PALM BEACH T (CHANDOR, KA 121 VIA FLORI	ENZA GARDENS, FL 33418) Delete REN		Address:) Change ()Additi	on
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	107 VIA FLORI PALM BEACH T (CHANDOR, KA 121 VIA FLORI PALM BEACH VP (DAVIS, MONT) 105 VIA FLORI	ENZA GARDENS, FL 33418) Delete ,REN ENZA GARDENS, FL 33418) Delete		Address: City-St-Zip: Title: Name: Address:	() Change ()Additi) Change ()Additi	
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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: BARBARA LUSTRIN P 04/20/2009