## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006567

FILED Jan 13, 2009 Secretary of State

Entity Name: ENDA HOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
2720 SW MIAMI, FL				
Current Mailing Address:		New Mailing Address:		
10022 SW MIAMI, FL	24 TERRACE 33165			
El Number	: 86-1113681	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
Name and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
	ENRIQUE 100 COURT 33165 US			
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida.	ubmits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
n the Stat	e of Florida. RE:	ubmits this statement for the place.		ed office or registered agent, or both,  Date
n the Stat	e of Florida. RE:	ic Signature of Registered Ag	ent	
n the Stati SIGNATU DFFICER Title: Jame: Address:	e of Florida.  RE: Electroni  S AND DIRECT	ic Signature of Registered Ag FORS: Delete QUE OURT	ent	Date
n the Stat BIGNATU DFFICER Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	e of Florida.  RE: Electroni  S AND DIRECT  P () BENITEZ, ENRIGATES 2720 SW 100 C MIAMI, FL 3316	ic Signature of Registered Ag  FORS:  Delete  QUE  OURT  35  Delete  AN  ERRACE	ent  ADDITIONS/CHANG  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR
n the Stat	e of Florida.  RE:  Electroni  S AND DIRECT  P ()  BENITEZ, ENRIG  2720 SW 100 C  MIAMI, FL 3316  V ()  LABRADOR, JU,  10002 SW 24 TI  MIAMI, FL 3316	ic Signature of Registered Ag  FORS:  Delete QUE OURT 85  Delete AN ERRACE 85  Delete N HTERRACE	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  SES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: VIVIAN VICTORES T 01/13/2009