

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006473

FILED  
Jan 28, 2010  
Secretary of State

**Entity Name:** EAST VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4801 S UNIVERSITY DRIVE - STE. 132  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

4801 S UNIVERSITY DRIVE - STE. 132  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 55-0791874

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAKALAR & ASSOCIATES  
150 SOUTH PINE ISLAND ROAD  
SUITE 540  
PLANTATION, FL 33324 US

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

NEW COMMUNITY STRATEGIES  
4801 S UNIVERSITY DRIVE  
STE 132  
DAVIE, FL 33328 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: MAUREEN POPEJOY, CAM

01/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: STALLWORTH, BRANDON  
Address: 428 NE 2ND AVE  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D  
Name: HOORN, STEVE  
Address: 472 N.E. 2 AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: DT  
Name: HANSEN, JAMES  
Address: 440 N.E. 2 AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: VP  
Name: BURDIN, DUSTIN  
Address: 430 N.E. 2 AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33301

I hereby 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 all other like empowered.

SIGNATURE: JAMES HANSEN

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01/28/2010

Electronic Signature of Signing Officer or Director

Date