

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N02000008051

1. Entity Name
REGALO HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
1145 SAWGRASS COTP PKWY
SUNRISE, FL 33323 US

Mailing Address
1145 SAWGRASS COTP PKWY
SUNRISE, FL 33323 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09162008

Chg-NP

CR2E037 (12/06)

4. FEI Number
42-1587599

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PDC
RODRIGUEZ, AURO
1145 SUNGRASS LOOP PKWY
SUNRISE, FL 33323 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
VPD
RODRIGUEZ, AARON
1145 SAWGRASS CORP PKWY
FORT LAUDERDALE, FL 33323 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
SD
TORRES, JAN
1145 SUNGRASS CORP PKWY
SUNRISE, FL 33323 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
VPD
BATISTA, DANIEL
1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
RODJERS, WARREN
1145 SAWGRASS CORP PKWY
FORT LAUDERDALE, FL 33323 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PD
AARON RODRIGUEZ
1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
VPD
DANIEL BATISTA
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
600137175606
10/22/08--01048--003 **61.25 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exceptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

09/24/08

954 438 2607

10/15/08