

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000065

FILED
Feb 28, 2008
Secretary of State

Entity Name: G.O. ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2601 S BAYSHORE DR, STE 200
COCONUT GROVE, FL 33133

New Principal Place of Business:

11011 SHERIDAN STREET
SUITE 208
COOPER CITY, FL 33026

Current Mailing Address:

396 ALHAMBRA CIRCLE
230
CORAL GABLES, FL 33134

New Mailing Address:

11011 SHERIDAN STREET
SUITE 208
COOPER CITY, FL 33026

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AVILA, EDUARDO
2601 S BAYSHORE DR
STE 200
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

EISINGER, BROWN, LEWIS & FRANKEL
4000 HOLLYWOOD BLVD
SUITE 265 SOUTH
HOLLYWOOD, FL 33021 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: DENNIS EISINGER

02/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: AVILA, EDUARDO
Address: 2601 S BAYSHORE DR, STE 200
City-St-Zip: COCONUT GROVE, FL 33133

Title: DV () Delete
Name: AVILA, CARLOS
Address: 2601 S BAYSHORE DR, STE 200
City-St-Zip: COCONUT GROVE, FL 33133

Title: DST () Delete
Name: RUBIN, EDUARDO
Address: 2601 S BAYSHORE DR, STE 200
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: AL, FERNANDEZ
Address: 11011 SHERIDAN STREET, SUITE 208
City-St-Zip: COOPER CITY, FL 33026

Title: DV (X) Change () Addition
Name: NELSON, FERNANDEZ
Address: 11011 SHERIDAN STREET, SUITE 208
City-St-Zip: COOPER CITY, FL 33026

Title: DST (X) Change () Addition
Name: KEVIN, SMORENBURG
Address: 11011 SHERIDAN STREET, SUITE 208
City-St-Zip: COOPER CITY, FL 33026

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: AL FERNANDEZ

DP

02/28/2008

Electronic Signature of Signing Officer or Director

Date