## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000002283

FILED Apr 25, 2005 Secretary of State

Entity Name: SONARA AT MALIBU BAY NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

12448 SW 127TH AVENUE MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

 12448 SW 127TH AVENUE
 C/O M & E ASSOCIATES OF MIAMI

 MIAMI, FL 33186
 13200 SW 128 STREET, SUITE F-3

MIAMI, FL 33186

FEI Number: 20-0826800 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

PATRICIA KIMBALL FLETCHER PA 200 SOUTH BISCAYNE BLVD SUITE 3400 MIAMI, FL 33131 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 SIERRA, FELIX
 Name:
 FERNANDEZ, MARTHA

 Address:
 12448 SW 127TH AVENUE
 Address:
 12448 SW 127TH AVENUE

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: DV ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SPANO, KIMBERLY
 Name:

 Address:
 12448 SW 127TH AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

Title: DST ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GARCIA, GENE
 Name:

 Address:
 12448 SW 127TH AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARTHA FERNANDEZ DP 04/25/2005