

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2005
Secretary of State**

DOCUMENT# N04000002770

Entity Name: BAMBOO FLATS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1500 NORTH FEDERAL HIGHWAY SUITE 300
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

1500 NORTH FEDERAL HIGHWAY SUITE 300
FORT LAUDERDALE, FL 33304

New Mailing Address:

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

Name and Address of Current Registered Agent:

MASTRIANA, F. RONALD ESQ
1500 NORTH FEDERAL HIGHWAY SUITE 300
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: MASTRIANA, R. BRIAN
Address: 1500 NORTH FEDERAL HIGHWAY SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: VD () Delete
Name: HALE, KENNY
Address: 1314 EAST LAS OLAS BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: STD () Delete
Name: MASTRIANA, ALEXANDRA
Address: 1500 NORTH FEDERAL HIGHWAY SUITE 200
City-St-Zip: FORT LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: R. BRIEN MASTRIANA

PD

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date