

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 19, 2008
Secretary of State**

DOCUMENT# N06000000148

Entity Name: AVANTI HOMEOWNERS ASSOCIATION, INCORPORATED**Current Principal Place of Business:**3250 MARY ST STE 402
COCONUT GROVES, FL 33133**New Principal Place of Business:**155-193 NORTH SHORE DRIVE
NORMANDY ISLE, FL 33141**Current Mailing Address:**3250 MARY ST STE 402
COCONUT GROVES, FL 33133**New Mailing Address:**P.O. BOX 402507
MIAMI BEACH, FL 33140

FEI Number: 20-4053705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GOLDBERG, MICHAEL
3250 MARY ST STE 402
COCONUT GROVE, FL 33133 US**Name and Address of New Registered Agent:**COMPLETE PROPERTY MANAGEMENT RESOURCES
3550 BISCAYNE BLVD.
SUITE 401
MIAMI, FL 33137 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: RAY HICKS, CEO

06/19/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DST () Delete
Name: BERMAN, DANA J
Address: 501 CONTINENTAL PLAZA 3250 MAIN STREET
City-St-Zip: COCONUT GROVE, FL 33133Title: DV (X) Delete
Name: SUKOFF, IRA
Address: 501 CONTINENTAL PLAZA 3250 MAIN STREET
City-St-Zip: COCONUT GROVE, FL 33133Title: DP (X) Delete
Name: SCHWARTZ, DAREN
Address: 501 CONTINENTAL PLAZA 3250 MAIN STREET
City-St-Zip: COCONUT GROVE, FL 33133Title: MGRM (X) Delete
Name: GOLDBERG, MICHAEL
Address: 3250 MARY ST STE 402
City-St-Zip: COCONUT GROVE, FL 33133**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: SCHWARTZ, DARREN
Address: 3250 MARY STREET SUITE 402
City-St-Zip: COCONUT GROVE, FL 33133 USTitle: () 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 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: DARREN SCHWARTZ

P

06/19/2008

Electronic Signature of Signing Officer or Director

Date