

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000202

FILED
Jan 30, 2009
Secretary of State

Entity Name: BIMINI AT THE OASIS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

M & E ASSOCIATES OF MIAMI, INC.
13055 SW 42 ST, SUITE 203
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

M & E ASSOCIATES OF MIAMI, INC.
13055 SW 42 ST, SUITE 203
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-5511921 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ASSOCIATION LAW GROUP, PL
1666 KENNEDY CAUSEWAY, SUITE 305
MIAMI BCH, FL 33141 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: VD () Delete
Name: TORRA, BERNIE
Address: 11755 SW 90 ST
City-St-Zip: MIAMI, FL 33186

Title: V () Delete
Name: MARTINEZ, FERNANDO
Address: 11755 SW 90 ST
City-St-Zip: MIAMI, FL 33186

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GREHN, DANIELLE
Address: 3172 NE 3 DR
City-St-Zip: HOMESTEAD, FL 33033

Title: VP (X) Change () Addition
Name: SANCHEZ, OLGA
Address: 337 NE 31 AVE
City-St-Zip: HOMESTEAD, FL 33033

Title: ST () Change (X) Addition
Name: ESTRADA, FRANCISCO
Address: 359 NE 32 TERRACE
City-St-Zip: HOMESTEAD, FL 33033

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: DANIELLE GREHN

P

01/30/2009

Electronic Signature of Signing Officer or Director

Date