

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003682

FILED
May 01, 2009
Secretary of State

Entity Name: MEDITERRANEA MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD
PH
CORAL GABLES, FL 33134

New Principal Place of Business:

2074 W. INDIANTOWN ROAD
SUITE 200
JUPITER, FL 33458

Current Mailing Address:

% BARBAR BEGUIRISTAIN
2121 PONCE DE LEON BLVD PH
CORAL GABLES, FL 33134

New Mailing Address:

2074 W. INDIANTOWN ROAD
SUITE 200
JUPITER, FL 33458

FEI Number: 20-8854278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MARKOV, JOHN
C/O PRIME MANAGEMENT
2074 W. INDIANTOWN ROAD, SUITE 200
JUPITER, FL 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: JOHN MARKOV

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Change (X) Addition
Name: HELLINGER, ANDREW B
Address: 235 ALTARA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

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: ANDREW B. HELLINGER

PST

05/01/2009

Electronic Signature of Signing Officer or Director

Date