

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001141

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: BANYANS BY THE GABLES HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6655 SW 69 LANE  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

6655 SW 69 LANE  
MIAMI, FL 33143

**New Mailing Address:**

FEI Number: 65-0503983

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEREZ-QUINTAIROS, ILEANA  
6665 SW 69 LANE  
MIAMI, FL 33143 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: P/D ( ) Delete  
Name: QUINTAIROS, GEORGE F, .  
Address: 6655 SW 69 LANE  
City-St-Zip: MIAMI, FL 33143

Title: V/D ( ) Delete  
Name: MALAVE, SHEILA  
Address: 6660 SW 69 LANE  
City-St-Zip: MIAMI, FL 33143

Title: TD ( ) Delete  
Name: MALAVE, SHEILA  
Address: 6660 SW 69TH LN  
City-St-Zip: MIAMI, FL 33143

Title: S/D ( ) Delete  
Name: FERREIRO, MIGUEL ANGEL  
Address: 6675 SW 69 LANE  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V/D (X) Change ( ) Addition  
Name: PEREZ-QUINTAIROS, ILEANA  
Address: 6655 SW 69 LANE  
City-St-Zip: MIAMI, FL 33143

Title: TD (X) Change ( ) Addition  
Name: PEREZ, MAUREEN  
Address: 6665 SW 69TH LN  
City-St-Zip: MIAMI, FL 33143

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: GEORGE QUINTAIROS

P/D

04/28/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date