## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000004580

FILED Apr 20, 2010 Secretary of State

Entity Name: ALHAMBRA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:** 

New Principal Place of Business:

C/O CENTURY MANAGEMENT SERVICES, INC 1495 NORTH PARK DRIVE

C/O PINES PROPERTY MANAGEMENT 19620 WEST PINES BLVD., SUITE 205

WESTON, FL 33326

PEMBROKE PINES, FL 33029

C/O PINES PROPERTY MANAGEMENT

**Current Mailing Address:** 

New Mailing Address:

C/O CENTURY MANAGEMENT SERVICES, INC 1495 NORTH PARK DRIVE WESTON, FL 33326

P. O. BOX 820100

SOUTH FLORIDA, FL 33082

FEI Number: 65-0737586

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LAWRENCE D. BACHE, ESQ 9000 W. SHERIDAN ST.

PEMBROKE PINES, FL 33024 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:

Electronic Signature of Registered Agent

FEI Number Applied For ( )

Date

## **OFFICERS AND DIRECTORS:**

TOMBLEY, EDWARD Name: Address: 19880 SW 3RD PL

City-St-Zip: PEMBROKE PINES, FL 33029 US

Title:

Name: KLONARIDES, GERARD Address: 19927 SW 3RD PL

City-St-Zip: PEMBROKE PINES, FL 33029 US

Title:

COLLAZO, SONIA Name: Address: 362 SW 200TH TERR

City-St-Zip: PEMBROKE PINES, FL 33029 US

Title:

Name: CASTILLO, LISA Address: 455 SW 200TH TERR

City-St-Zip: PEMBROKE PINES, FL 33029 US

Title:

ACEVEDO, JUANITA Name: 415 SW 200 TERR Address:

PEMBROKE PINES, FL 33029 US City-St-Zip:

Title:

EAGAN, NELL Name: Address: 19894 SW 3RD PL

PEMBROKE PINES, FL 33029 US City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: GERARD KLONARIDES

Electronic Signature of Signing Officer or Director

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04/20/2010