## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N11383

FILED Jan 17, 2009 Secretary of State

Entity Name: FRANKLIN FARMS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 9421 BELAIRE DRIVE MIRAMAR, FL 33025 US **Current Mailing Address: New Mailing Address:** 9965 MIRAMAR PARKWAY 9421 BELAIRE DRIVE PO BOX 161 MIRAMAR, FL 33025 US MIRAMAR, FL 33025 FEI Number: 59-2611056 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GLAZER & ASSOCIATES, P.A. 3113 STIRLING ROAD SUITE 201 HOLLYWOOD, FL 33021 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SIMON, RONALD Name: Name: 9410 CHELSA DRIVE Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: VD () Delete Title: VD (X) Change ( ) Addition KING, ROBERT Name: MYERS, PHYLISS Name: Address: 9410 DUNHILL DRIVE Address: 9320 DUNHILL DRIVE City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIRAMAR, FL 33025 Title: STD () Delete Title: () Change () Addition GLASER, DENISE Name: Name: 9421 BELAIRE DRIVE Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: MCKIE, CHRISTOPHER Name: 2341 FAIRMONT AVENUE Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MYERS, PHYLISS VERNON, HERMAN Name: Name: 9320 DUNHILL DRIVE 9321 CHELSEA DRIVE Address: Address: City-St-Zip: MIRAMAR, FL 33025 City-St-Zip: MIRAMAR, FL 33025

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: DENISE GLASER STD 01/17/2009