

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735762

FILED
Jan 27, 2009
Secretary of State

Entity Name: GALLOWAY GLEN HOMES ASSOCIATION, INC.

Current Principal Place of Business:

6401 S.W. 87 AVENUE
SUITE 210
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

6401 S.W. 87 AVENUE
SUITE 210
MIAMI, FL 33173

New Mailing Address:

FEI Number: 59-2258383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARC A. KUPERMAN
7695 SW 104 STREET
SUITE 210
MIAMI, FL 33156 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: PD () Delete
Name: BARADAT, TONY
Address: 6401 S.W. 87 AVE., #210
City-St-Zip: MIAMI, FL 33173

Title: T () Delete
Name: KOREN, JAY
Address: 6401 SW 87 AVE 210
City-St-Zip: MIAMI, FL 33173

Title: VD () Delete
Name: HOLTZMAN, LEE
Address: 6401 SW 87 AVE 210
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: TONY BARADAT

PRES

01/27/2009

Electronic Signature of Signing Officer or Director

Date