2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770325

FILED Jan 15, 2009 Secretary of State

Entity Name: OLD CUTLER LAKES BY THE BAY COMMUN	ITT ASSOCIATION, INC.	
Current Principal Place of Business:	New Principal Place of Business:	
9780 SW 216 ST MIAMI, FL 33190 US		
Current Mailing Address:	New Mailing Address:	
C/O THE CONTINENTAL GROUP INC. 11981 SW 144 CT STE 201 MIAMI, FL 33186 US		
FEI Number: 59-2378225 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:	
PAIGE, ROBERT E		
9500 S. DADELAND BLVD STE 550 MIAMI, FL 33190 US		
MIAMI, FL 33190 US The above named entity submits this statement for the purpos in the State of Florida.	e of changing its registered office or registered agent, or bot	:h,
MIAMI, FL 33190 US The above named entity submits this statement for the purpos in the State of Florida. SIGNATURE:	e of changing its registered office or registered agent, or bot	:h,
MIAMI, FL 33190 US The above named entity submits this statement for the purpos in the State of Florida.	e of changing its registered office or registered agent, or bot Date	:h, —
MIAMI, FL 33190 US The above named entity submits this statement for the purpos in the State of Florida. SIGNATURE:		_
MIAMI, FL 33190 US The above named entity submits this statement for the purpos in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	Date	_
MIAMI, FL 33190 US The above named entity submits this statement for the purpos in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: Title: PD () Delete Name: SHAND, JACKIE Address: 9780 SW 216 STREET	Date ADDITIONS/CHANGES TO OFFICERS AND DIRECT Title: () Change () Addition Name: Address:	_

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: ILYNE SBAR T 01/15/2009