

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N01000005483

**Entity Name:** SECRET POND P.U.D. HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Dec 10, 2016**  
**Secretary of State**  
**CC8167429841**

**Current Principal Place of Business:**

C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FL 33306

**Current Mailing Address:**

C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FL 33306 US

**FEI Number: 59-3745097**

**Certificate of Status Desired: No**

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

MG PROPERTY MANAGEMENT  
C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FL 33306 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: NATHAN MILLER- BAGLEY**

**12/10/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PRES  
Name LAVERDE, FELIPE  
Address C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
City-State-Zip: FORT LAUDERDALE FL 33306

Title TRES  
Name GERBER, SCOTT  
Address C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
City-State-Zip: FORT LAUDERDALE FL 33306

Title VP  
Name PAUGH, JAMES  
Address C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
City-State-Zip: FORT LAUDERDALE FL 33306

Title TREASURER  
Name BETTENCOURT, RAMONA  
Address C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
City-State-Zip: FORT LAUDERDALE FL 33306

Title DIRECTOR  
Name EDELMAN, CRAIG  
Address C/O MG PROPERTY MANAGEMENT  
3049 NORTH FEDERAL HIGHWAY  
City-State-Zip: FORT LAUDERDALE FL 33306

*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: FELIPE LAVERDE**

**PRESIDENT**

**12/10/2016**

Electronic Signature of Signing Officer/Director Detail

Date