

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006473

**Entity Name:** EAST VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

NEW COMMUNITY STRATEGIES  
4350 OAKES RD SUITE 516  
DAVIE, FL 33314

**Current Mailing Address:**

NEW COMMUNITY STRATEGIES  
4350 OAKES RD SUITE 516  
DAVIE , FL 33314 US

**FEI Number:** 55-0791874

**Certificate of Status Desired:** No

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

BAKALAR AND ASSOCIATES, PA  
150 SOUTH PINE ISLAND ROAD,  
SUITE 540  
PLANTATION, FL 33324 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:** MICHAEL BAKALAR

04/30/2013

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name STALLWORTH, BRANDON  
Address C/O NCS 4350 OAKES RD  
4350 OAKES RD SUITE 516  
City-State-Zip: DAVIE FL 33314

Title D  
Name SELIGMAN, JAY ALLEN  
Address C/O NCS  
4350 OAKES RD SUITE 516  
City-State-Zip: DAVIE FL 33314

Title S  
Name OLIVER, ALISON  
Address C/O NCS  
4350 OAKES RD SUITE 516  
City-State-Zip: DAVIE FL 33314

Title VPT  
Name ROTHLEIN, MICHAEL  
Address C/O NCS  
4350 OAKES RD SUITE 516  
City-State-Zip: DAVIE FL 33314

*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:** BRANDON STALLWORTH

PRESIDENT

04/30/2013

Electronic Signature of Signing Officer/Director Detail

Date