

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1000000779

FILED
Mar 29, 2016
Secretary of State
CC5044802296

Entity Name: MONTERRA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
CORAL SPRINGS, FL 33065

Current Mailing Address:

UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
CORAL SPRINGS, FL 33065 US

FEI Number: 27-3182062

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RENEE, CAMPBELL
UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
CORAL SPRINGS, FL 33065 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: RENEE CAMPBELL

03/29/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name LOWE, RICARDO
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

Title D
Name BOUTIN, MARRIE
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

Title SD
Name GALEN, ALYSON
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

Title TD
Name SCHNIEDER, ALAN
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

Title VPD
Name CIECHANOWIECKI, AVI
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

Title D
Name AMIGA, SARI
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

Title D
Name POPOWITZ, GREG
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

Title D
Name THOMASON, TODD
Address UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD 103
City-State-Zip: CORAL SPRINGS FL 33065

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: RICARDO LOWE

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03/29/2016

