2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004580

Entity Name: ALHAMBRA HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 18, 2014
Secretary of State
CC6000639573

Date

Current Principal Place of Business:

C/O THE CAPIN GROUP

14160 PALMETTO FRONTAGE ROAD SUITE 33

MIAMI LAKES, FL 33016

Current Mailing Address:

C/O THE CAPIN GROUP 14160 PALMETTO FRONTAGE ROAD SUITE 33 MIAMI LAKES, FL 33016 US

FEI Number: 65-0737586 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVEN REED COHEN, P.A. 5599 S. UNIVERSITY DRIVE STE 303

DAVIE, FL 33328 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:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title VP Title D

Name TOMLEY, ED Name GONZALEZ, FELINA

Address C/O THE CAPIN GROUP Address C/O THE CAPIN GROUP

14160 PALMETTO FRONTAGE ROAD 14160 PALMETTO FRONTAGE ROAD

SUITE 33 SUITE 33

City-State-Zip: MIAMI LAKES FL 33016 City-State-Zip: MIAMI LAKES FL 33016

Title T Title D

Name COLLAZO, SONIA Name RODRIGUEZ, NANCY

Address C/O THE CAPIN GROUP Address C/O THE CAPIN GROUP

14160 PALMETTO FRONTAGE ROAD 14160 PALMETTO FRONTAGE ROAD

SUITE 33 SUITE 33

City-State-Zip: MIAMI LAKES FL 33016 City-State-Zip: MIAMI LAKES FL 33016

Title S Title D

Name ACEVEDO, JUANITA Name BEHR, ALAN

Address C/O THE CAPIN GROUP Address C/O THE CAPIN GROUP

14160 PALMETTO FRONTAGE ROAD 14160 PALMETTO FRONTAGE ROAD

SUITE 33 SUITE 33

City-State-Zip: MIAMI LAKES FL 33016 City-State-Zip: MIAMI LAKES FL 33016

Title P

Name VELAZQUEZ, CARMEN
Address C/O THE CAPIN GROUP

14160 PALMETTO FRONTAGE ROAD

SUITE 33

City-State-Zip: MIAMI LAKES FL 33016

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: CARMEN VELAZQUEZ PRESIDENT 03/18/2014