

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706156

FILED  
Feb 13, 2009  
Secretary of State

**Entity Name:** COUNTRY CLUB OF MIAMI ESTATES IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

6751 GUY DEL RUSSO PKWY.  
HIALEAH, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

6751 GUY DEL RUSSO PKWY.  
HIALEAH, FL 33015

**New Mailing Address:**

**FEI Number:** 59-1755567

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'DELL, ANA  
6151 GUY DEL RUSSO PARKWAY  
HIALEAH, FL 33015 US

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

O'DELL, ANA  
6751 GUY DEL RUSSO PARKWAY  
HIALEAH, FL 33015 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: ANA O'DELL

02/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PACEY, LARRY  
Address: 6751 GUY DEL RUSSO PKWY  
City-St-Zip: HIALEAH, FL 33015

Title: VPT ( ) Delete  
Name: RIZO, ALEX  
Address: 6751 GUY DEL RUSSO PKWY  
City-St-Zip: HIALEAH, FL 33015

Title: SD ( ) Delete  
Name: CRUZ, ORALIA  
Address: 6751 GUY DEL RUSSO PKWY  
City-St-Zip: HIALEAH, FL 33015

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANA O'DELL

D

02/13/2009

Electronic Signature of Signing Officer or Director

Date