

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 714300

**FILED**  
**Apr 18, 2010**  
**Secretary of State**

**Entity Name:** SKY LAKE - HIGHLAND LAKES AREA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

20300 NE 24 AVENUE  
MIAMI, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 630721  
MIAMI, FL 331630721

**New Mailing Address:**

**FEI Number:** 59-2260378

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATZA, ROCHELLE S  
20020 NE 21 AVENUE  
MIAMI, FL 33179 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VD  
Name: PROMOFF, DAVID  
Address: 19841 N.E. 23 AVE  
City-St-Zip: MIAMI, FL 33180

Title: PD  
Name: SCHANERMAN, BARI  
Address: 2145 NE 207 STREET  
City-St-Zip: MIAMI, FL 33179

Title: SD  
Name: MATZA, ROCHELLE S  
Address: 20020 NE 21 AVENUE  
City-St-Zip: MIAMI, FL 33179

Title: VPD  
Name: MORTON, JONATHAN  
Address: 2135 NE 204 STREET  
City-St-Zip: MIAMI, FL 33179

Title: VD  
Name: BRAVERMAN, MORT  
Address: 20510 NE 19TH AVE  
City-St-Zip: MIAMI, FL 33179

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: BARI SCHANERMAN

PRES

04/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date