

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716390

FILED
May 11, 2010
Secretary of State

Entity Name: ARROWHEAD CONDOMINIUM, INC.

Current Principal Place of Business:

12240 SW 53RD STREET - STE. 501
COOPER CITY, FL 33330

New Principal Place of Business:

7116 W. MCNAB ROAD
TAMARAC, FL 33321

Current Mailing Address:

C/O DYNAMIC COMMUNITY MGMT SRVS
P.O. BOX 824266
PEMBROKE PINES, FL 33082

New Mailing Address:

C/OPROPERTY MANAGEMENT PARTNERS
7116 W. MCNAB ROAD
TAMARAC, FL 33321

FEI Number: 59-1273084 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

PROPERTY MANAGEMENT PARTNERS
7116 W. MCNAB ROAD
TAMARAC, FL 33321 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: MARYANN PRINCIPATO

05/11/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GOLDEN, SUSAN
Address: 8121 SW 24 COURT #404
City-St-Zip: DAVIE, FL 33324

Title: VP
Name: PETERSEN, KYLE
Address: 2510 SW 81 AVENUE #108
City-St-Zip: DAVIE, FL 33324

Title: T
Name: BELCH, MARY
Address: 2431 SW 82 AVE. #208
City-St-Zip: DAVIE, FL 33324

Title: S
Name: ROJAS, IVAN
Address: 2451 SW 82 AVE STE 110
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: D
Name: GERSHE, JEFFREY
Address: 2441 SW 82 AVE # 102
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: D
Name: CHIARELLI, CHRISTIAN
Address: 2481 SW 82 AVE. #102
City-St-Zip: DAVIE, FL 33324

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: MARYANN PRINCIPATO

LCAM

05/11/2010

Electronic Signature of Signing Officer or Director

Date