

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720324

FILED
Apr 13, 2009
Secretary of State

Entity Name: TAMARAC LAKES NORTH ASSOCIATION, INC.

Current Principal Place of Business:

2600 NW 53 STREET
TAMARAC, FL 333099627

New Principal Place of Business:

Current Mailing Address:

2600 NW 53 STREET
TAMARAC, FL 333099627

New Mailing Address:

FEI Number: 59-6201646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD, STE C-207
FORT LAUDERDALE, FL 33312 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 () Delete
Name: ROMERO, OBDULIA
Address: 2712 NW 52ND PLACE
City-St-Zip: TAMARAC, FL 33309

Title: SD () Delete
Name: SABIO, JASON
Address: 2803 NW 51ST PL
City-St-Zip: TAMARAC, FL 33309

Title: PD () Delete
Name: NEITSCH, MARY
Address: 2811 NW 52 CT
City-St-Zip: TAMARAC, FL 33309

Title: TD () Delete
Name: WRIGHT, SHARRON
Address: 8422 NW 52 STREET
City-St-Zip: TAMARAC, FL 33309

Title: D () Delete
Name: WEST, CANDACE
Address: 2807 NW 52 COURT
City-St-Zip: TAMARAC, FL 33309

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: OBDULIA, ROMERO
Address: 2712 NW 52ND PLACE
City-St-Zip: TAMARAC, FL 33309

Title: PD (X) Change () Addition
Name: SABIO, JASON
Address: 2803 NW 51ST PL
City-St-Zip: TAMARAC, FL 33309

Title: D (X) Change () Addition
Name: HOWREY, BILL
Address: 2600 NW 53RD STREET
City-St-Zip: TAMARAC, FL 33309

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

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

Title: D () Change (X) Addition
Name: ADANI, JEFF
Address: 2600 NW 53RD STREET
City-St-Zip: TAMARAC, FL 33309

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: JASON SABIO

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date