2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# 727199

Entity Name: DORSET HOUSE ASSOCIATION INC

Current Principal Place of Business:

2500 N.E. 135TH ST.
NORTH MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

2500 N.E. 135TH ST.
NORTH MIAMI, FL 33181

New Mailing Address:

FEI Number: 59-1485410 **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
SUITE C-207
FT. 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: S ( ) Delete
Name: DEL SOL, MARIA
Address: 2500 NE 135 ST
City-St-Zip: NORTH MIAMI, FL 33181

Title: T ( ) Delete
Name: KREIMAN, KONSTANTIN
Address: 2500 NE 135 ST
City-St-Zip: MIAMI, FL 33181

Title: VP ( ) Delete
Name: STOBS, ANN
Address: 2500 NE 135 ST
City-St-Zip: MIAMI, FL 33181

Title: VP ( ) Delete
Name: HALPERN, KAREN
Address: 2500 NE 135 ST
City-St-Zip: MIAMI, FL 33181

Title: P (X) Delete
Name: GUARD, MIKE
Address: 2500 NE 135 ST
City-St-Zip: NORTH MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GUARD, MIKE
Address: 2500 NE 135 ST
City-St-Zip: NORTH MIAMI, FL 33181

Title: T (X) Change ( ) Addition
Name: KREIMAN, KOSTA
Address: 2500 NE 135 ST
City-St-Zip: MIAMI, FL 33181

Title: VP/S (X) Change ( ) Addition
Name: STOBS, ANN
Address: 2500 NE 135 ST
City-St-Zip: MIAMI, FL 33181

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: KOSTA KREIMAN T 03/31/2009

Electronic Signature of Signing Officer or Director — Date