

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734957

FILED  
Jan 19, 2009  
Secretary of State

**Entity Name:** MIRAMAR GARDENS TOWNHOUSE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

7953 NW 53RD ST  
MIAMI, FL 33166

**New Principal Place of Business:**

3399 N.W. 72 AVE.  
SUITE 215  
MIAMI, FL 33122

**Current Mailing Address:**

7953 NW 53RD ST  
MIAMI, FL 33166

**New Mailing Address:**

3399 N.W. 72 AVE.  
SUITE 215  
MIAMI, FL 33122

**FEI Number:** 59-2931960

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUGGER, ROBERT A SR  
7953 NORTHWEST 53 STREET  
MIAMI, FL 33166 US

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

DUGGER, ROBERT A SR  
3399 N.W. 72 AVE.  
SUITE 215  
MIAMI, FL 33122 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: ROBERT DUGGER

01/19/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BRINSON, CLAUDETTE  
Address: 3908 N.W. 213 STREET  
City-St-Zip: OPA LOCKA, FL 33055

Title: DVP ( ) Delete  
Name: COPELAND, KENNETH  
Address: 21441 NW 39 AVE.  
City-St-Zip: OPA LOCKA, FL 33055

Title: D ( ) Delete  
Name: RYLAND, VIOLET  
Address: 3863 NORTHWEST 213 STREET  
City-St-Zip: OPA LOCKA, FL 33055

Title: DT ( ) Delete  
Name: JOHNSON, SEBRINA  
Address: 3726 NW 213 ST  
City-St-Zip: OPA LOCKA, FL 33055

Title: DS ( ) Delete  
Name: CENTINO, ELSIE  
Address: 21309 NW 213 ST  
City-St-Zip: OPA LOCKA, FL 33055

**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:

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: CLAUDETTE BRINSON

PD

01/19/2009

Electronic Signature of Signing Officer or Director

Date