

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735575

FILED
Mar 15, 2012
Secretary of State

Entity Name: TWIN OAKS VILLAS OF BROWARD COUNTY ASSOCIATION, INC.

Current Principal Place of Business:

5000 S.W. 40 AVENUE
FT LAUDERDALE, FL 33314

New Principal Place of Business:

Current Mailing Address:

5000 S.W. 40 AVENUE
DANIA BEACH, FL 33314

New Mailing Address:

FEI Number: 59-1891755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANIE, FAY
5046 SW 40TH AVENUE
DANIA BEACH, FL 33314 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: P/T
Name: GRANIE, FAY
Address: 5046 SW 40TH AVENUE
City-St-Zip: DANIA BEACH, FL 33314

Title: BM
Name: BONANNO, MARK
Address: 5016 SW 40TH AVE
City-St-Zip: DANIA BEACH, FL 33314

Title: BM
Name: VAUGHAN, GAIL
Address: 5004 SW 40TH AVE
City-St-Zip: DANIA BEACH, FL 33314

Title: VP/T
Name: GALEANO, GUSTAVO
Address: 5038 SW 40TH AVENUE
City-St-Zip: DANIA BEACH, FL 33314

Title: BM
Name: SHOELSON, MITCHELL
Address: 5022 SW 40TH AVENUE
City-St-Zip: DANIA BEACH, FL 33314

Title: S
Name: THOMAS, CHARMAINE
Address: 5030 SW 40TH AVENUE
City-St-Zip: DANIA BEACH, FL 33314

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: FAY GRANIE

P

03/15/2012

Electronic Signature of Signing Officer or Director

Date