

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737345

FILED
Mar 14, 2008
Secretary of State

Entity Name: MANARANDA VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

C/O HRT REALTY SERVICES LLC
1060 HOLLAND DRIVE #3-D
BOCA RATON, FL 33487 US

New Principal Place of Business:

C/O HRT REALTY SERVICES LLC
1200 CLINT MOORE ROAD # 8
BOCA RATON, FL 33487 US

Current Mailing Address:

C/O HRT REALTY SERVICES LLC
1060 HOLLAND DRIVE #3-D
BOCA RATON, FL 33487 US

New Mailing Address:

C/O HRT REALTY SERVICES LLC
1200 CLINT MOORE ROAD # 8
BOCA RATON, FL 33487 US

FEI Number: 59-1724335

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, ROBERT C ESQ
319 SE 14TH ST
FORT LAUDERDALE, FL 333161929 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: PD () Delete
Name: SHAPPE, ALICIA
Address: 1021 MOCKINGBIRD AVE., #403
City-St-Zip: PLANTATION, FL 33324

Title: SECD () Delete
Name: REGINA WAKEFIELD,
Address: 1021 MOCKINGBIRD LANE, #317
City-St-Zip: PLANTATION, FL 33324

Title: D () Delete
Name: MICHAEL DIGABRIELE,
Address: 1021 MOCKINGBIRD LANE #309
City-St-Zip: PLANTATION, FL 33324

Title: VPD () Delete
Name: SHEEHAN, DENNIS
Address: 1021 MOCKINGBIRD AVE, # 3
City-St-Zip: PLANTATION, FL 33324

Title: TD () Delete
Name: SHERMAN, BARRY
Address: 1021 MOCKINGBIRD AVE, # 114
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SECD (X) Change () Addition
Name: WAKEFIELD, REGINA
Address: 1021 MOCKINGBIRD LANE, #317
City-St-Zip: PLANTATION, FL 33324

Title: D (X) Change () Addition
Name: GREENSPOON, SEYMOUR
Address: 1021 MOCKINGBIRD LANE #109
City-St-Zip: PLANTATION, FL 33324

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: ALICIA SHAPPE

P

03/14/2008

Electronic Signature of Signing Officer or Director

Date