2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738165

FILED Mar 02, 2009 Secretary of State

Entity Name: THE CROSSINGS HOMEOWNERS'ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

11578 SW 132 AVD MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

11578 SW 132 AVD MIAMI, FL 33186

FEI Number: 59-1801747 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JOYCE GOODMAN GUENTHER P.A. 10723 SW 104 STREET MIAMI, FL 33176 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:

Clastrania Ciarachura of Danistana d'Anant

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

WEINSTEIN, MATT

MIAMI, FL 33186

11103 SW 132 CT 4

Name:

Address:

City-St-Zip:

Title: PD (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete
 Title:
 PD
 (X) Change () Additing the properties of the properti

Title: VPD Title: (X) Change () Addition () Delete ENOS, DONNA Name: MONGE, VICTOR Name: Address: 13408 SW 113 TERR Address: 10944 SW 135 CT CIR City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 DELLINGER-ACEITUNO, LESLIE
 Name:
 PARIS, MICHAEL

 Address:
 13252 SW 112 TERR
 Address:
 11415 SW 133 CT #3

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33186

 Name:
 PARIS, MICHAEL
 Name:
 EPPERSON, ELNA

 Address:
 11774 SW 135 CT
 Address:
 11766 SW 135 PL

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33186

Title: TD () Delete Title: D (X) Change () Addition

 Name:
 PEREA, MARCELO
 Name:
 PEARLMUTTER, NANCY

 Address:
 11774 SW 135 CT
 Address:
 11785 SW 135 CT

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33186

Title: D () Delete 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: LESLIE DELLINGER ACEITUNO PD 03/02/2009