2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738588

FILED Feb 18, 2009 Secretary of State

Entity Name: CEDAR VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 9752 S.W. 1 STREET PLANTATION, FL 33324 **Current Mailing Address: New Mailing Address:** 9752 SW 1ST STREET PLANTATION, FL 33324 FEI Number: 90-0328802 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: PLASTINO, THERESA A 9752 S.W. 1 STREET PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PLASTINO, THERESA Name: Name: 9752 SW 1ST STREET Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: () Delete Title: () Change () Addition PAPENDICK, ROBERTO Name: Name: Address: 40 TORCHWOOD AVE. Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: () Delete Title: () Change () Addition BREMSON, DAVID Name: Name: 50 TORCHWOOD AVE. Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: DΙ () Delete Title: () Change () Addition Name: MOTTT, RUSSELL Name: Address: 9764 SW 1ST ST Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: Title: () Delete () Change () Addition JOHNSTONE, SEAN Name: Name: 9760 SW 1ST ST Address: Address: PLANTATION, FL 33324 BR City-St-Zip: 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: THERESA A PLASTINO PRES 02/18/2009