

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 738588

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** CEDAR VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

9764 S.W. 1 STREET  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

9764 S.W. 1 STREET  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 90-0328802

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOTT, RUSSELL  
9764 S.W. 1 STREET  
PLANTATION, FL 33324 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  
**Name:** PAPENDICK, ROBERTO  
**Address:** 40 TORCHWOOD AVE  
**City-St-Zip:** PLANTATION, FL 33324

**Title:** VPT  
**Name:** BERMSON, DAVID  
**Address:** 50 TORCHWOOD AVE  
**City-St-Zip:** PLANTATION, FL 33324

**Title:** ST  
**Name:** MOTT, RUSSELL  
**Address:** 9764 S.W. 1 STREET  
**City-St-Zip:** PLANTATION, FL 33324

**Title:** T  
**Name:** PERRY, MARY  
**Address:** 9772 SW 1 ST  
**City-St-Zip:** PLANTATION, FL 33324

**Title:** DI  
**Name:** UPTON, CHRIS  
**Address:** 9776 SW 1 ST  
**City-St-Zip:** PLANTATION, FL 33324 BR

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:** RUSSELL MOTT

ST

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date