

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738701

FILED
Feb 21, 2011
Secretary of State

Entity Name: TIERRA DEL REY PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O HAWK-EYE MANAGEMENT, INC.
3901 N. FEDERAL HWY. SUITE 202
BOCA RATON, FL 33431 US

New Principal Place of Business:

3901 N. FEDERAL HIGHWAY
STE. 202
BOCA RATON, FL 33431 US

Current Mailing Address:

C/O HAWK-EYE MANAGEMENT, INC..
3901 N. FEDERAL HWY. SUITE 202
BOCA RATON, FL 33431 US

New Mailing Address:

3901 N. FEDERAL HIGHWAY
STE. 202
BOCA RATON, FL 33431 US

FEI Number: 59-2160282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOCIATED CORPORATE SERVICES, LLC
6111 BROKEN SOUND PARKWAY NW
STE. 200
BOCA RATON, FL 33487 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: CRABB, MICHAEL
Address: 3901 N. FEDERAL HIGHWAY, STE 202
City-St-Zip: BOCA RATON, FL 33431 US

Title: VPD
Name: ASOTSKY, MARK
Address: 3901 N. FEDERAL HIGHWAY, STE.202
City-St-Zip: BOCA RATON,, FL 33431 US

Title: SD
Name: DUNN, LOWELL
Address: 3901 N. FEDERAL HIGHWAY, STE 202
City-St-Zip: BOCA RATON, FL 33431 US

Title: TD
Name: SINGER, ANN
Address: 3901 N. FEDERAL HIGHWAY, STE 202
City-St-Zip: BOCA RATON, FL 33431 US

Title: D
Name: SLAVIC, JOHN
Address: 3901 N. FEDERAL HIGHWAY, STE 202
City-St-Zip: BOCA RATON, FL 33431 US

Title: D
Name: ANGEL, GLADYS
Address: 3901 N. FEDERAL HIGHWAY, STE 202
City-St-Zip: BOCA RATON, FL 33431 US

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: MICHAEL CRABB

PD

02/21/2011

Electronic Signature of Signing Officer or Director

Date