2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Aug 05, 2009 **DOCUMENT#741320** Secretary of State

Entity Name: CAMINO SHERIDAN VILLAS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O FOUNDATION PROPERTY SERVICES 4750 W. COMMERCIAL BLVD. TAMARAC, FL 33319 **New Mailing Address: Current Mailing Address:** C/O FOUNDATION PROPERTY SERVICES 4750 W. COMMERCIAL BLVD. TAMARAC, FL 33319 FEI Number: 59-1958133 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: FOUNDATION PROPERTY SERVICES 4750 W. COMMERCIAL BLVD TAMARAC, FL 333319 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: () Delete () Change () Addition GOSSETT, DAVID Name: Name: 2325 N 37 AVENUE Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: Title: () Delete Title: D (X) Change () Addition SPERANZA, ANGELA Name: RUIZ, JO Name: Address: 2424 N. 37TH AVENUE Address: 2313 N. 37TH AVENUE City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: HOLLYWOOD, FL 33021 US Title: () Delete Title: () Change () Addition CALAS, YVETTE Name: Name: 2414 N. 37TH AVENUE Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: MAXWELL, KIM Name: 2312 N. 37TH AVENUE Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: Title: () Delete Title: () Change () Addition ZAPOONE, RITA Name: Name: 2306 N. 37TH AVENUE UNIT Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: Title: (X) Delete Title: () Change () Addition FISHER, JOAN Name: Name: Address: 2310 N. 37TH AVENUE Address: HOLLYWOOD, FL 33021 US 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: MARY BANMILLER OM 08/05/2009