

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744559

FILED
Apr 24, 2009
Secretary of State

Entity Name: AVIARA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

FEDERAL HOME & PROP. MGMT.
6898 CONSOLATA ST.
BOCA RATON, FL 33433

New Principal Place of Business:

JOSEPH DI GILIO
22224 B BOCA RANCHO DRIVE
BOCA RATON, FL 33428

Current Mailing Address:

FEDERAL HOME & PROPERTY MANAGEMENT
P.O. BOX 811180
BOCA RATON, FL 33481 US

New Mailing Address:

JOSEPH DI GILIO
22224 B BOCA RATON DRIVE
BOCA RATON, FL 33428

FEI Number: 59-1917659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE CHAPMAN LAW FIRM, P.A.
7700 CONGRESS AVE., STE. 3204
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 () Delete
Name: DIGILIO, JOSEPH
Address: 22224 B BOCA RANCHO DR
City-St-Zip: BOCA RATON, FL 33428

Title: VPD () Delete
Name: MARCH, MARION
Address: 22216 D BOCA RANCHO DR
City-St-Zip: BOCA RATON, FL 33428

Title: TD () Delete
Name: HOFFER, CHRISTINE
Address: 22232 A BOCA RANCHO DR
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOSEPH DI GILIO

PD

04/24/2009

Electronic Signature of Signing Officer or Director

Date