

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745621

FILED  
Apr 20, 2010  
Secretary of State

**Entity Name:** VILLAGES OF HOMESTEAD HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

15600 SW 288 ST  
STE #406  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

15600 SW 288 STREET  
STE #406  
HOMESTEAD, FL 33033

**Current Mailing Address:**

P.O. BOX 924176  
HOMESTEAD, FL 330924176

**New Mailing Address:**

FEI Number: 59-1989980      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JOYCE GOODMAN-GUENTHER, PA  
10723 SW 104 ST.  
MIAMI, FL 33176    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: CONSTABLE, MARK  
Address: 1647 EGRET ROAD  
City-St-Zip: HOMESTEAD, FL 33035

Title: VPD  
Name: KNOWLES, YVONNE  
Address: 1697 N GOLDENEYE LANE  
City-St-Zip: HOMESTEAD, FL 33035

Title: D  
Name: HARLEY, BARBARA  
Address: 1380 S. FIELDLARK LANE  
City-St-Zip: HOMESTEAD, FL 33035

Title: TD  
Name: WOODSIDE, WOODY  
Address: 929 K HAMILTON DRIVE  
City-St-Zip: HOMESTEAD, FL 33034

Title: D  
Name: SMITH, GERALD  
Address: 2812 SAN REMO CIRCLE  
City-St-Zip: HOMESTEAD, FL 33035

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: MARK CONSTABLE

PD

04/20/2010

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

\_\_\_\_\_  
Date