2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745644

FILED Mar 09, 2009 Secretary of State

Entity Name: CATALONIA LAKE VILLAS HOMEOWNERS ASSOCIATION, INC.

FEI Number Applied For ()

Current Principal Place of Business:

New Principal Place of Business:

C/O COURTESY PROPERTY MGMT.

C/O COURTESY PROPERTY MGMT. 13250 SW 135 AVE

13250 SW 135 AVE MIAMI, FL 33186

MIAMI, FL 33186

New Mailing Address:

C/O COURTESY PROPERTY MANAGEMENT, INC.

C/O COURTESY PROPERTY MGMT.

13250 SW 135TH AVENUE

Current Mailing Address:

13250 SW 135 AVE

MIAMI, FL 33186

MIAMI, FL 33186

FEI Number: 59-2023248

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SKRLD, INC 201 ALHAMBRA CIR. STE. 1102

CORAL GABLES, FL 33134 US

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:

(X) Change () Addition

VPD () Delete MESAS, ALEX Name:

Name: MESAS, ALEX MR Address: 14231 SW 62 ST

City-St-Zip:

14231 SW 62 ST Address: City-St-Zip: MIAMI, FL 33183

> Title: SDT (X) Change () Addition

MIAMI, FL 33183

Title: SDT () Delete YAPP, CYNTHIA Name: Address: 14225 SW 62 ST City-St-Zip: MIAMI, FL 33183 US

Name: YAPP, CYNTHIA MS Address: 14203 SW 62 ST City-St-Zip: MIAMI, FL 33183 US

Title: PDP () Delete PAVON, MARIA C Name: Address: 14223 SW 62 ST

Title: PDP (X) Change () Addition

City-St-Zip: MIAMI, FL 33183

PAVON, MARIA C MS Name: Address: 14223 SW 62 ST City-St-Zip: MIAMI, FL 33183 US

Title: () Delete FERIA, CAROL Name: Address: 14349 SW 62 STREET City-St-Zip: MIAMI, FL 33183

Title: (X) Change () Addition

Name: FERIA, CAROL MS Address: 14349 SW 62 STREET City-St-Zip: MIAMI, FL 33183

PD

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: MARIA CRISTINA PAVON Electronic Signature of Signing Officer or Director

Date

03/09/2009