

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750701

FILED
Mar 05, 2009
Secretary of State

Entity Name: DEVON-AIRE VILLAS HOMEOWNERS ASSOCIATION NO. 5, INC.

Current Principal Place of Business:

C/O LAKEVIEW MGMT
13388 SW 128 ST
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

C/O LAKEVIEW MGMT
13388 SW 128 ST
MIAMI, FL 33186

New Mailing Address:

FEI Number: 59-2104783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUNETTA, SUE
13388 SOUTHWEST 128 STREET
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

MITZENMACHER, MARGIE
13388 SOUTHWEST 128 STREET
MIAMI, FL 33186 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: MARGIE MITZENMACHER

03/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHRISTENSEN, JULIE
Address: 11850 SOUTHWEST 122 PLACE
City-St-Zip: MIAMI, FL 33186

Title: DT () Delete
Name: MITZENMACHER, MARGIE
Address: 12230 SOUTHWEST 116 LANE
City-St-Zip: MIAMI, FL 33186

Title: D (X) Delete
Name: ROMAN, CARMEN
Address: 11785 SOUTHWEST 122 PLACE
City-St-Zip: MIAMI, FL 33186

Title: VPD () Delete
Name: LINDSAY, DORRETT
Address: 12240 SW 118 LANE
City-St-Zip: MIAMI, FL 33186

Title: PD () Delete
Name: VAY, SCOTT
Address: 12235 SOUTHWEST 118 LANE
City-St-Zip: MIAMI, FL 33186

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:

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: MARGIE MITZENMACHER

DT

03/05/2009

Electronic Signature of Signing Officer or Director

Date