2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# 750954

Entity Name: MIRAMAR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

501 MIRAMAR LANE
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

203 MIRAMAR LANE
PALM BEACH GARDENS, FL 33410 US

Current Mailing Address:

P.O. BOX 32206
PALM BEACH GARDENS, FL 334209206

New Mailing Address:

P.O. BOX 32206
PALM BEACH GARDENS, FL 334202206 US

FEI Number: 59-2144524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KAETER, STEVEN
501 MIRAMAR LANE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

MCCANN, PAUL D
203 MIRAMAR LANE
PALM BEACH GARDENS, FL 33410 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: PAUL MCCANN 01/26/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KAETER, STEVEN
Address: 501 MIRAMAR LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D ( ) Delete
Name: HOLMES, DAN MR.
Address: 21 NORTH HEPBURN AVE. #14
City-St-Zip: JUPITER, FL 33458 US

Title: D ( ) Delete
Name: KOZLOWSKI, LORRAINE
Address: 102 MIRAMAR LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D (X) Delete
Name: MCCANN, PAUL MR.
Address: 203 MIRAMAR LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: TAULBEE, NANCY F D
Address: 502 MIRAMAR LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D (X) Change ( ) Addition
Name: MCCANN, PAUL D
Address: 203 MIRAMAR LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: D (X) Change ( ) Addition
Name: KOZLOWSKI, LORRAINE D
Address: 102 MIRAMAR LANE
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

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: PAUL MCCANN D 01/26/2009
Electronic Signature of Signing Officer or Director Date