2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2009
Secretary of State

DOCUMENT# 751254

Entity Name: EMERALD VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3998 ATLANTA ST
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

3998 1/2 ATLANTA ST
HOLLYWOOD, FL 33021 US

Current Mailing Address:

3998 ATLANTA STREET
HOLLYWOOD, FL 33021 US

New Mailing Address:

3998 1/2 ATLANTA STREET
HOLLYWOOD, FL 33021 US

FEI Number: 59-2003626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAPARATA, DEBRA
3991 SIMMS STREET
HOLLYWOOD, FL 33021 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: TD ( ) Delete
Name: ABBOTT, ROBERT
Address: 3990 ATLANTA ST
City-St-Zip: HOLLYWOOD, FL 33021 US

Title: PD ( ) Delete
Name: SAPARATA, DEBRA
Address: 3991 SIMMS TREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: SD ( ) Delete
Name: MAY, JAMIE
Address: 3997 SIMMS STREET
City-St-Zip: HOLLYWOOD, FL 33021 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition
Name: LECOURT, JOANNE C
Address: 3994 ATLANTA ST
City-St-Zip: HOLLYWOOD, FL 33021 US

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

Title: SD (X) Change ( ) Addition
Name: JONES, CHANTAL
Address: 3998 ATLANTA STREET
City-St-Zip: HOLLYWOOD, FL 33021 US

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: JOANNE C. LECOURT TD 03/09/2009

Electronic Signature of Signing Officer or Director — Date