

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753388

FILED
Jan 03, 2012
Secretary of State

Entity Name: IVANHOE ESTATES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

MIAMI MANAGEMENT, INC.
1145 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

MIAMI MANAGEMENT, INC.
1145 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 59-2872815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL & BERGER
5297 W. COPANS RD.
MARGATE, FL 33063 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: AARON, KATHRYN
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: VP
Name: MITCHELL, JOSEPH
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: S
Name: WETZ, TONI
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: T
Name: KATZ, MICHAEL
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: WEECH, MICHELLE
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

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: KATHY AARON

P

01/03/2012

Electronic Signature of Signing Officer or Director

Date