

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754098

FILED
Apr 08, 2009
Secretary of State

Entity Name: MISTY LAKE SOUTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

% LANDMARK MANAGEMENT SERVICES
1941 NW 150 AVE
HOLLYWOOD, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

% LANDMARK MANAGEMENT SERVICES
1941 NW 150 AVE
HOLLYWOOD, FL 33028 US

New Mailing Address:

FEI Number: 59-2141494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDALL KROGER & ASSOCIATES, P.A.
621 NW 53 STREET
SUITE 300
BOCA RATON, FL 33487 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: T () Delete
Name: CA;EMDER, SHAUN
Address: 545 NW 210 ST 203
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: ROBINSON, VALDA
Address: 525 NW 210 ST STE 103
City-St-Zip: MIAMI, FL 33169

Title: P () Delete
Name: DOLLAR, DALE
Address: 615 NW 210 ST STE 105
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: FENNELL, LINDA
Address: 535 NW 210 ST 101
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: LYTTLE, ANGELLA
Address: 625 NW 210 ST STE 103
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: CALLENDER, SHAWN
Address: 545 NW 210 ST 203
City-St-Zip: MIAMI, FL 33169

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: DALE DOLLAR

PRES

04/08/2009

Electronic Signature of Signing Officer or Director

Date