

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754235

FILED
May 01, 2009
Secretary of State

Entity Name: REDLAND RANCH TWIN HOMES ASSOCIATION, INC.

Current Principal Place of Business:

C/O HERNANDEZ, EMMA
1283 NW 14TH AVE
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

C/O EMMA HERNANDEZ
1 S KROME AVE
HOMESTEAD, FL 33030 US

New Mailing Address:

FEI Number: 59-2571239 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HERNANDEZ, EMMA
28221 S.W. 162ND AVE
HOMESTEAD, FL 33033 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 () Delete
Name: HERNANDEZ, EMMA
Address: 28221 S.W. 162 AVE.
City-St-Zip: HOMESTEAD, FL 33033

Title: VD () Delete
Name: SIGLER, JOSE
Address: 1360 N.W. 13 ST.
City-St-Zip: HOMESTEAD, FL 33030

Title: SD () Delete
Name: AMADO, EGUEO
Address: 1251 N. W. 14 AVE.
City-St-Zip: HOMESTEAD, FL 33030

Title: D () Delete
Name: LLAGUNO, GEO
Address: 12964 SW 133 CT
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: NAJERA, MIGUEL
Address: 1362 NW 13 STREET
City-St-Zip: HOMESTEAD, FL

Title: D () Delete
Name: ALMARAZ, AMADOR
Address: 11818 SW 273 LANE
City-St-Zip: NARANJA, FL 33032

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
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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: EMMA HERNANDEZ

PD

05/01/2009

Electronic Signature of Signing Officer or Director

Date