2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755468

Jan 14, 2009 Secretary of State

Entity Name: CALUSA POINT ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

13310 SW 88TH TERR MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

13310 SW 88TH TERR MIAMI, FL 33186

FEI Number: 59-2138641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

SIEGFRIED, RIVERA L PA ZAPICO, ILEANA

201 ALHAMBRA CIRCLE 10691 N. KENDALL DRIVE

#1102 #307

CORAL GABLES, FL 33134 US MIAIMI, FL 33176 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: ILEANA ZAPICO 01/14/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FILED

() Delete (X) Change () Addition

MUGGLI, STEPHEN PEREZ, BELEN Name: Name: 8880 C SW 133RD PLACE Address: 13301-G SW 88 TERRACE Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: VPD () Delete Title: (X) Change () Addition

LOPEZ, SHARON Name: LOPEZ, SHARON Name:

Address: 13311-D SW 188TH TERRACE Address: 13311-D SW 188TH TERRACE City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: () Delete Title: SD (X) Change () Addition KIDD, JORGE KIDD, JORGE Name: Name:

13361-A SW 88 TERRACE Address: Address: 13361-A SW 88 TERRACE

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: SD () Delete Title: (X) Change () Addition Name: GOMEZ, ELIZABETH Name: GOMEZ, ELIZABETH

13301-B SW 88 TERR Address: Address: 13301-B SW 88 TERR City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: VPD () Delete Title: (X) Change () Addition

BARROSO, AIMEE SILVEYRA, AIMEE Name: Name: 13340-B SW 90 TERR 13340-B SW 90 TERR Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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: SHARON LOPEZ PD 01/14/2009