

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758060

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: CEDAR VILLAS AT MIRAMAR HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

4801 S UNIVERSITY DR  
#255  
DAVIE, FL 33328 US

## New Principal Place of Business:

4801 S UNIVERSITY DR  
#251  
DAVIE, FL 33328 US

## Current Mailing Address:

4801 S UNIVERSITY DR  
#255  
DAVIE, FL 33328 US

## New Mailing Address:

4801 S UNIVERSITY DR  
#251  
DAVIE, FL 33328 US

FEI Number: 59-2302367

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RUSSELL-LOVE, DONNETTE  
4801 S. UNIVERSITY DR #255  
DAVIE, FL 33328 US

## Name and Address of New Registered Agent:

RUSSELL-LOVE, DONNETTE  
4801 S. UNIVERSITY DR #251  
DAVIE, FL 33328 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:

04/15/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: THORNTON, MINNIE  
Address: 7808 PEMBROKE RD.  
City-St-Zip: MIRAMAR, FL 33023

Title: VP ( ) Delete  
Name: SPROUSE, CHRISTINE  
Address: 7836 PEMBROKE RD  
City-St-Zip: MIRAMAR, FL 33023

Title: SD ( ) Delete  
Name: AARONS, JOYCEMINE  
Address: 7808 PEMBROKE ROAD  
City-St-Zip: MIRAMAR, FL 33023

Title: TD ( ) Delete  
Name: GAUNTLETT, MARIO  
Address: 7960 PEMBROKE RD  
City-St-Zip: MIRAMAR, FL 33023

Title: D ( ) Delete  
Name: WONG, LENNY  
Address: 7804 PEMBROKE RD  
City-St-Zip: MIRAMAR, FL 33023

## 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  
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: MARCIA TAYLOR

MGR

04/15/2008

Electronic Signature of Signing Officer or Director

Date