

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758815

FILED
Apr 24, 2009
Secretary of State

Entity Name: SWALLOW NEST CONDOMINIUM HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

441 SWALLOW DR.
MIAMI SPRINGS, FL 331664457 US

New Principal Place of Business:

Current Mailing Address:

441 SWALLOW DR.
MIAMI SPRINGS, FL 331664457 US

New Mailing Address:

FEI Number: 65-0113735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELEO, LUCIA
641 SWAN AVENUE
MIAMI SPRINGS, FL 331664457 US

Name and Address of New Registered Agent:

LEON, YOEL
441 SWALLOW DRIVE
APT 11
MIAMI SPRINGS, FL 331664457 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: YOEL LEON

04/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANTIESTEBAN, JORGE
Address: 441 SWALLOW DRIVE SUITE 2
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: SD () Delete
Name: SIDONS, JOHN
Address: 1140 PLOVER AVENUE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: TD () Delete
Name: DELEO, LUCIA
Address: 641 SWAN AVENUE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: LEON, YOEL
Address: 441 SWALLOW DRIVE APT #11
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VP () Change (X) Addition
Name: SHELTON, MARK
Address: 441 SWALLOW DRIVE APT 1
City-St-Zip: MIAMI SPRINGS, FL 33166

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: YOEL LEON

TD

04/24/2009

Electronic Signature of Signing Officer or Director

Date