

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761049

FILED  
Mar 10, 2009  
Secretary of State

**Entity Name:** CALUSA CLUB VILLAGE CONDOMINIUM BLDG. B ASSOCIATION, INC.

**Current Principal Place of Business:**

ALL FLORIDA MANAGEMENT COMPANY  
9415 SUNSET DRIVE SUITE 149  
MIAMI, FL 33173

**New Principal Place of Business:**

9415 SUNSET DRIVE  
SUITE 149  
MIAMI, FL 33173

**Current Mailing Address:**

ALL FLORIDA MANAGEMENT COMPANY  
9415 SUNSET DRIVE SUITE 149  
MIAMI, FL 33173

**New Mailing Address:**

9415 SUNSET DRIVE  
SUITE 149  
MIAMI, FL 33173

**FEI Number:** 59-2384476

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELONI, EDOARDO  
900 S.W. 40TH AVENUE  
PLANTATION, FL 33317 US

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

FEIN & MELONI, PA  
900 S.W. 40TH AVENUE  
PLANTATION, FL 33317 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: FEIN & MELONI PA

03/10/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: ZARANDY, GLORIA  
Address: 9415 SUNSET DRIVE SUITE 149  
City-St-Zip: MIAMI, FL 33173

Title: PD ( ) Delete  
Name: RAMIREZ, LUISA  
Address: 9415 SUNSET DRIVE SUITE 149  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: RAMIREZ, LUISA  
Address: 9415 SUNSET DRIVE #149  
City-St-Zip: MIAMI, FL 33173

Title: TD (X) Change ( ) Addition  
Name: RAMIREZ, LUISA  
Address: 9415 SUNSET DRIVE SUITE 149  
City-St-Zip: MIAMI, FL 33173

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: LUISA RAMIREZ

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date