

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761851

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** FALLS TOWNHOUSES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

12889 SW 91 CT  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

12889 SW 91 CT  
MIAMI, FL 33176

**New Mailing Address:**

FEI Number: 59-2368081

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LUNIOR, BOB  
9180 SW 128 LANE  
MIAMI, FL 33176 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: D  
Name: YONON, DUANE  
Address: 12891 SW 91 STREET  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: ROSELL, EVELIO  
Address: 12807 SW 91 COURT  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: MYERS, DIANE  
Address: 12818 SW 91 CT.  
City-St-Zip: MIAMI, FL 33176

Title: PRES  
Name: LUNIOR, BOB  
Address: 9180 SW 128 LANE  
City-St-Zip: MIAMI, FL 33176

Title: TD  
Name: WILLIS, LINDA  
Address: 9178 SW 128TH LN  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: HOPKINS, JOHN  
Address: 9192 SW 128 LANE  
City-St-Zip: MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: BOB LUNIOR

PRES

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date