2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 22, 2008 8:00 am Secretary of State

04-22-2008 90015 024 ****61.25

1. Entity Nam	MENT # 762284 OLONY HOMEOWNERS A	SSOCIATION, INC.			-22-2008 90015 (J24 *****61	.25	
6925 NW 42ND ST 692		Mailing Address 6925 NW 42ND ST MIAMI, FL 33166-6820	25 NW 42ND ST					
Principal Place of Business - No P.O. Box # 3. No		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01182008 Ch	g-NP CR2E	037 (12/06)		
City & State		City & State		4. FEI Number 59-224530	 5	_ 	plied For at Applicable	
Zip	Country	Zip	Country	5. Certificate of Sta	atus Desired	\$8.75 Add	itional	
	6. Name and Address of Current i	Registered Agent		7. Name and Addi	ess of New Registere	d Agent		
			Name					
SKRID INC. 201 ALHAMBRA CIRCLE STE 1102			Street Address	(P.O. Box Number is N	lot Acceptable)		***	
CORAL GA	ABLES, FL 33134							
			City		F	L Zip Code	е	
	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent a		Pegistered Agent signature requir		DATE			
	Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State			
10.	OFFICERS AND DIF	ECTORS	11.	ADDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS IN	10 -	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JONES JESSEA. 5117 NW 93 DORAL WAY MIAM! FL 33178	Delete	NAME BL STREET ADDRESS 43	P CCK, MARTH	IA A	Change	Addition	
TITLE NAME			CITY-ST-ZIP	44 NW 48 1	00/21/12 / ERK	ACE		
STREET ADDRESS CITY-ST-2IP	DVP EWING, THOMAS A 9352 NW 48 DORAL TERR. MIAMI, FL 33178	☐ Delete	TITLE D'V / NAME DE STREET ADDRESS 93	44 NW 48 14M1, FL 3	3178 furent Boral curcu	☐ Change	Addition	
STREET ADDRESS	EWING, THOMAS A 9352 NW 48 DORAL TERR.	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DP NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	JAHAM, Lr 23 NW 5013 LAMI, FL 3: LAMI, FL 3: NES, JESSE	3178 YURENT BORAL CIRCU 3178 ADORAL WAY	□ Change E SO ·	Addition	
STREET ADDRESS CITY; ST-2IP TITLE NAME STREET ADDRESS	EWING, THOMAS A 9352 NW 48 DORAL TERR. MIAMI, FL 33178 DVP MERCADE, ROBERTO 5121 P.W. 93 DORAL WAY		CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DP NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	14 NW 48 JAMIL, FL 3 JAHAM, Lr 23 NW 5DB 1AMIL, FL 3 NB, JESSE 17 NW 93	3178 YURENT BORAL CIRCU 3178 ADORAL WAY	□ Change E SO ·		
STREET ADDRESS CITY-ST-ZIP VITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	EWING, THOMAS A 9352 NW 48 DORAL TERR. MIAMI, FL 33178 DVP MERCADE, ROBERTO 5121 P.W. 93 DORAL WAY MIAMI, FL 33178 DS BEDINGFIELD, MARY ANN 9318 NW SW DORAL CIR. S.	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	14 NW 48 JAMIL, FL 3 JAHAM, Lr 23 NW 5DB 1AMIL, FL 3 NB, JESSE 17 NW 93	3178 YURENT BORAL CIRCU 3178 ADORAL WAY	☐ Change	☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Here & Hours Vess BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR