2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766655

FILED Jan 11, 2008 Secretary of State

Entity Name: BANYAN TREE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: C/O L & C ROYAL MANAGEMENT 12301 NW 7TH LN MIAMI, FL 33182 **New Mailing Address: Current Mailing Address:** C/O L & C ROYAL MANAGEMENT 12301 NW 7TH LN MIAMI, FL 33182 FEI Number: 59-2390641 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOPEZ, JOSE L 12301 NW 7TH LN MIAMI, FL 33182 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete GLEASON, MARY A CASTRO, ROBERT Name: Name: 9846 HAMMOCKS BLVD. UNIT 106 Address: 9912 HAMMOCKS BLVD. UNIT 103 Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: MIAMI, FL 33196 Title: () Delete Title: () Change () Addition JOHN, PATRICIA Name: Name: Address: 9912 HAMMOCKS BLVD, UNIT 203 Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: () Delete Title: () Change () Addition HURST, JEFFREY Name: Name: 9850 HAMMOCKS BLVD. UNIT 103 Address: Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: PD () Delete Title: () Change () Addition GONZALEZ, FERNANDO Name: Name: 9874 HAMMOCKS BLVD. UNIT 104 Address: Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: Title: VPD () Delete Title: VPD (X) Change () Addition HURTADO, DIEGO Name: Name: LUCKETT, PHILLIP 9704 HAMMOCKS BLVD. UNIT 202 9706 HAMMOCKS BLVD. UNIT 104 Address: Address: City-St-Zip: MIAMI, FL 33196 City-St-Zip: MIAMI, FL 33196 Title: () Delete Title: () Change () Addition KRUGLIAK, ZVI Name: Name: Address: 9726 HAMMOCKS BLVD. UNIT 102 Address: MIAMI, FL 33196 City-St-Zip: 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: FERNANDO GONZALEZ PD 01/11/2008