

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768287

FILED
Mar 02, 2009
Secretary of State

Entity Name: QUATRINE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

12350 SW 132 COURT
STE 114
MIAMI, FL 33186 US

New Principal Place of Business:

3100 NW 72 AVE
STE 113
MIAMI, FL 33122 US

Current Mailing Address:

12350 SW 132 COURT
STE 114
MIAMI, FL 33186 US

New Mailing Address:

3100 NW 72 AVE
STE 113
MIAMI, FL 33122 US

FEI Number: 59-2344917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGEL, DAVID ESQ.
121 ALHAMBRA PLAZA
10TH FLOOR
CORAL GABLES, FL 33134 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: PD () Delete
Name: GABAY, ELIZABETH
Address: 20145 NE 3 CT # 10
City-St-Zip: MIAMI, FL 33179 US

Title: VPD () Delete
Name: MAXWELL, PAUL S
Address: 20145 NE 3RD COURT #9
City-St-Zip: MIAMI, FL 33179 US

Title: TD () Delete
Name: ROTBERG, MITCHELL
Address: 20260-6 NE 3RD COURT
City-St-Zip: MIAMI, FL 33179 US

Title: SD () Delete
Name: HOSEIN, NAILA
Address: 20260 NE 3RD CT, #2
City-St-Zip: MIAMI, FL 33179 US

Title: D () Delete
Name: RAMSEY, PAMELA
Address: 20260 NE 3RD COURT #1
City-St-Zip: MIAMI, FL 33179 US

Title: D () Delete
Name: RUSSOMANNO, LAURETTA
Address: 20105 NE 3RD COURT # 1
City-St-Zip: MIAMI, FL 331792967 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MAXWELL, PAUL S
Address: 20145 NE 3RD COURT #9
City-St-Zip: MIAMI, FL 33179 US

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

Title: D (X) Change () Addition
Name: SILVA, MICHAEL
Address: 20105 NE 3RD CT. #11
City-St-Zip: MIAMI, FL 33179 US

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

Title: () Change () Addition
Name:
Address:
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: MATHEW CICERO

MGR.

03/02/2009

Electronic Signature of Signing Officer or Director

Date