

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Jun 12, 2009  
Secretary of State**

DOCUMENT# 768287

Entity Name: QUATRINE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**3100 NW 72 AVE  
STE 113  
MIAMI, FL 33122 US**New Principal Place of Business:****Current Mailing Address:**3100 NW 72 AVE  
STE 113  
MIAMI, FL 33122 US**New Mailing Address:**

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:**SOUTH FLORIDA CONDOMINIUM MANAGEMENT, INC.  
3100 N W 72 AVE  
SUITE 113  
MIAMI, FL 33122 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: MATHEW CICERO

06/12/2009

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 USTitle: VP ( ) Delete  
Name: RUSSOMANO, LAURETTA  
Address: 20105 NE 3RD COURT #1  
City-St-Zip: MIAMI, FL 33179 USTitle: TD ( ) Delete  
Name: ROTBERG, MITCHELL  
Address: 20260 NE 3RD COURT #6  
City-St-Zip: MIAMI, FL 33179 USTitle: D ( ) Delete  
Name: SILVA, MICHAEL  
Address: 20105 NE 3RD CT. #11  
City-St-Zip: MIAMI, FL 33179 USTitle: S ( ) Delete  
Name: MOROS, SANDRA  
Address: 20120 NE 3RD CT. # 3  
City-St-Zip: MIAMI, FL 33179 USTitle: D ( ) Delete  
Name: RAMSEY, PAMELA  
Address: 20260 NE 3RD CT. # 1  
City-St-Zip: MIAMI, FL 331792967 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip: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: ELIZABETH GABAY

PRES

06/12/2009

Electronic Signature of Signing Officer or Director

Date