2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M87564

Entity Name: CENTENNIAL PROPERTIES CORPORATION

FILED Jan 07, 2009 Secretary of State

Current Principal Place of Business: New	Principal Place of Business:
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1300 NE MIAMI GARDENS DR. 308E MIAMI, FL 33179

Current Mailing Address: New Mailing Address:

2000 ISLAND BLVD 1300 NE MIAMI GARDENS DR. 308E MIAMI, FL 33179 US AVENTURA, FL 33160

FEI Number: 65-0057997 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

HCRM CORP 2200 NW CORP, BLVD STE 401 BOCA RATON, FL 33431

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BARR, ARTHUR BARR, ARTHUR Name: Name:

2800 ISLAND BLVD #503 2000 ISLAND BLVD. #307 Address: Address: City-St-Zip: AVENTURA, FL 33160 City-St-Zip: AVENTURA, FL 33160

Title: VΡ Title: VΡ (X) Change () Addition () Delete BARR, FLORENCE Name: Name: BARR, FLORENCE

2800 ISLAND BLVD #503 2000 ISLAND BLVD. # 307 Address: Address: AVENTURA, FL 33160 AVENTURA, FL 33160 City-St-Zip: City-St-Zip:

Title: Title: () Delete (X) Change () Addition

LYNN, MARK J LYNN, MARK J Name: Name:

2101 W. COMMERCIAL BLVD #2800 2200 NW CORP, BLVD STE 401 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: BOCA RATON, FL 33431

() Delete Title: Title: (X) Change () Addition

LYNN, MARK LYNN, MARK Name: Name:

2101 W. COMMERCIAL BLVD #2800 Address: Address: 2200 NW CORP. BLVD STE 401 City-St-Zip: FORT LAUDERDALE, FL 33309 City-St-Zip: BOCA RATON, FL 33431

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: ARTHUR BARR 01/07/2009