2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2012
Secretary of State

DOCUMENT# N00000005302

Entity Name: BUENA VIDA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1961 VIA BUENA VIDA
WELLINGTON, FL 33411

New Principal Place of Business:

Current Mailing Address:

C/O CASTLE GROUP
P.O. BOX 559009
FT. LAUDERDALE, FL 33355

New Mailing Address:

FEI Number: 65-1108497 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 NORTH COMMERCE PKWY
WESTON, FL 33326 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: P
Name: KAMINS, AL
Address: 8549 VIA BRILLIANTE
City-St-Zip: WELLINGTON, FL 33411

Title: VP
Name: KESHISH, BETSI
Address: 9336 VIA ELEGANTE
City-St-Zip: WELLINGTON, FL 33411

Title: T
Name: NETTIS, JULES
Address: 9569 VIA GRANDE WEST
City-St-Zip: WELLINGTON, FL 33411

Title: S
Name: LAPIDES, HOWIE
Address: 9649 VIA ELEGANTE
City-St-Zip: WELLINGTON, FL 33411

Title: D
Name: TIELL, MEL
Address: 9207 VIA CLASSICO EAST
City-St-Zip: WELLINGTON, FL 33411

Title: D
Name: SHAFFREN, HOWIE
Address: 9784 VIA GRANDAZZA WAY
City-St-Zip: WELLINGTON, FL 33411

I hereby 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 all other like empowered.

SIGNATURE: AL KAMINS PRES 02/08/2012

Electronic Signature of Signing Officer or Director — Date