

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007943

FILED  
Apr 07, 2010  
Secretary of State

**Entity Name:** ESPERANZA AT MIRASOL PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11400 NURSERY LANE  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

21045 COMMERCIAL TR  
BOCA RATON, FL 33486

**New Mailing Address:**

**FEI Number:** 65-1058346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ISAACSON, WILLIAM K AGENT  
21045 COMMERCIAL TR  
BOCA RATON, FL 33486 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: MARGOLIES, STEVE  
Address: 123 ESPERANZA WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: D  
Name: CAINE, FRED  
Address: 120 ESPERANZA  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: 1VPT  
Name: HELSBY, IAN  
Address: 170 ESPERANZA WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: S  
Name: WHITKEN, MEL  
Address: 113 ESPERANZA WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: 2VP  
Name: HARMON, KATZ  
Address: 119 ESPERANZA WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: STEVE MARGOLIS

P

04/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date