2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100000397

FILED Mar 25, 2010 Secretary of State

Entity Name: SATURNIA ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O CENTURY MANAGEMENT SERVICES, INC.

1495 NORTHPARK DRIVE

WESTON, FL 33326

Current Mailing Address:

C/O CENTURY MANAGEMENT SERVICES, INC.

1495 NORTHPARK DRIVE

BAKALAR & EICHNER, PA

150 SOUTH PINE ISLAND RD

PLANTATION, FL 33324 US

WESTON, FL 33326 FEI Number: 65-1074044

FEI Number Applied For ()

SUITE 220

SUITE 220

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

C/O VICTORY ACCT./1500 GATEWAY BOULEVARD

C/O VICTORY ACCT./1500 GATEWAY BOULEVARD

VICTORY ACCOUNTING SERVICES, INC. 1500 GATEWAY BOULEVARD

BOYNTON BEACH, FL 33426

BOYNTON BEACH, FL 33426

New Mailing Address:

SUITE 220

BOYNTON BEACH, FL 33426 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: VICKI FEICHT

03/25/2010

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

SUITE # 540

LAZAR, LARRY Name:

1500 GATEWAY BOULEVARD, SUITE 220 Address:

City-St-Zip: BOYNTON BEACH, FL 33426

Title:

Name: HUBERMAN, LANCE

Address: 1500 GATEWAY BOULEVARD, SUITE 220

City-St-Zip: BOYNTON BEACH, FL 33426

Title:

MIBAB, ALAN Name:

1500 GATEWAY BOULEVARD, SUITE 220 Address:

City-St-Zip: BOYNTON BEACH, FL 33426

Title:

Name: BLOCH, BRETT

1500 GATEWAY BOULEVARD, SUITE 220 Address:

City-St-Zip: BOYNTON BEACH, FL 33426

Title:

Name: LAVALLE, DAN

1500 GATEWAY BOULEVARD, SUITE 220 Address:

BOYNTON BEACH, FL 33426 City-St-Zip:

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.

Ρ SIGNATURE: LARRY LAZAR 03/25/2010