

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000397

FILED
Mar 30, 2012
Secretary of State

Entity Name: SATURNIA ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O UNITED COMMUNITY MANAGEMENT
11784 WEST SAMPLE RD. #103
CORAL SPRINGS, FL 33065

New Principal Place of Business:

11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

C/O UNITED COMMUNITY MANAGEMENT
11784 WEST SAMPLE RD. #103
CORAL SPRINGS, FL 33065

New Mailing Address:

11784 WEST SAMPLE ROAD
SUITE 103
CORAL SPRINGS, FL 33065 US

FEI Number: 65-1074044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICTORY ACCOUNTING SERVICES, INC.
1500 GATEWAY BOULEVARD
SUITE 220
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

SACHS, SAX & CAPLAN
6111 BROKEN SOUND PARKWAY, NW #200
SUITE 200
BOCA RATON, FL 33487 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: ANA MONTOYA

03/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: BLOCK, BRETT
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: VP
Name: HUBERMAN, LANCE
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: ST
Name: LAVALLE, DANIEL
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: P
Name: LAZAR, LARRY
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: D
Name: MINDELL, JOSEPH
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065 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: ANA MONTOYA

D

03/30/2012

Electronic Signature of Signing Officer or Director

Date