


2008 NOT-FOR-PROFIT CORPORATE ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # N01000004928
 1. Entity Name
SARACENO EAST COMMUNITY ASSOCIATION, INC.



Principal Place of Business 9715 W BROWARD BLVD PMB 235 PLANTATION, FL 33324	Mailing Address A & W PROPERTY MGMT INC. P.O. BOX 15624 PLANTATION, FL 33318
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01302008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1531618	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**A & W PROPERTY MGMT INC
 9715 W BROWARD BLVD PMB 235
 PLANTATION, FL 33324**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS STEIN, IRA 11755 NORTHWEST 2 STREET PLANTATION, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BERKOVITS, JOE 11735 NW 2 ST PLANTATION, FL 33325
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DEAN, ROBERTSON 11751 NW 1 STREET PLANTATION, FL 33325
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 02/13/08-80045-001 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **1/2/08** _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #