

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005714

FILED  
Apr 21, 2008  
Secretary of State

**Entity Name:** ENCHANTED PLACE HOMEOWNERS ASSOCIATION INC.

**Current Principal Place of Business:**

1710 NE 137 TERRACE  
MIAMI, FL 331811312

**New Principal Place of Business:**

**Current Mailing Address:**

1710 NE 137 TERRACE  
MIAMI, FL 331811312

**New Mailing Address:**

**FEI Number:** 65-1146646

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MADANSKY, LYNN  
1725 NE 137TH TERRACE  
N. MIAMI, FL 33181 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: PD ( ) Delete  
Name: DI GENOVA, KEN  
Address: 1710 NE 137TH TERR  
City-St-Zip: MIAMI, FL 331811312

Title: VD ( ) Delete  
Name: QUINONES, HIRAM  
Address: 1640 NE 137 TERRACE  
City-St-Zip: N. MIAMI, FL 33181

Title: SD ( ) Delete  
Name: HERNANDEZ, ALICIA  
Address: 1735 NE 137 TERR  
City-St-Zip: MIAMI, FL 331811312

Title: TD ( ) Delete  
Name: NICGORSKE, DAN  
Address: 1685 NE 137TH TERR  
City-St-Zip: MIAMI, FL 331811310

Title: D ( ) Delete  
Name: CORBETT, RUSSELL  
Address: 1780 NE 137TH TER  
City-St-Zip: MIAMI, FL 331811312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: NICGORSKI, DAN  
Address: 1685 NE 137TH TERR  
City-St-Zip: MIAMI, FL 331811310

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAN NICGORSKI

TD

04/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date