

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006113

FILED
Apr 08, 2009
Secretary of State

Entity Name: AQUA ISLAND HOMES ASSOCIATION, INC.

Current Principal Place of Business:

201 AQUA AVE #100
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

201 AQUA AVE #100
MIAMI BEACH, FL 33141 US

New Mailing Address:

201 AQUA AVE
SUITE #100
MIAMI BEACH, FL 33141 US

FEI Number: 65-1157645

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUIDO, EDWIN
201 AQUA AVENUE
SUITE 100
MIAMI BEACH, FL 33141 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: D () Delete
Name: ROBINS, CRAIG
Address: 201 AQUA AVE #100
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: DV () Delete
Name: CARO, MAURICIO
Address: 201 AQUA AVE #100
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: DP () Delete
Name: FREYVOGEL, WILLIAM
Address: 201 AQUA AVE #100
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: D () Delete
Name: TATARENKO, EGOR
Address: 201 AQUA AVE #100
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: DST () Delete
Name: BILZIN, MARSHA
Address: 201 AQUA AVE #100
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: D () Delete
Name: GREEN, MARLENE
Address: 201 AQUA AVE #100
City-St-Zip: MIAMI BEACH, FL 33141 US

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

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

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: EGOR TATARENKO

D

04/08/2009

Electronic Signature of Signing Officer or Director

Date