

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000009040

FILED
Jan 08, 2009
Secretary of State

Entity Name: RODEO ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12094 NW 5 STREET
MIAMI, FL 33182

New Principal Place of Business:

12094 NW 5TH STREET
MIAMI, FL 33182

Current Mailing Address:

12094 NW 5 STREET
MIAMI, FL 33182

New Mailing Address:

12094 NW 5TH STREET
MIAMI, FL 33182

FEI Number: 55-0830396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, JOHN
C/O RODEO ESTATES HOA, INC
12094 NW 5 STREET
MIAMI, FL 33182 US

Name and Address of New Registered Agent:

GARCIA, JOHN
C/O RODEO ESTATES HOA, INC
12094 NW 5TH STREET
MIAMI, FL 33182 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:

Electronic Signature of Registered Agent

01/08/2009

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, OSVALDO
Address: 12001 NW 5 STREET
City-St-Zip: MIAMI, FL 33182

Title: ST () Delete
Name: GARCIA, JOHN
Address: 12094 NW 5TH STREET
City-St-Zip: MIAMI, FL 33182

Title: VP () Delete
Name: ALVAREZ, JOSE
Address: 12000 NW 5 ST.
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, OSVALDO
Address: 12001 NW 5TH STREET
City-St-Zip: MIAMI, FL 33182

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

Title: VP (X) Change () Addition
Name: ALVAREZ, JOSE
Address: 12000 NW 5TH STREET
City-St-Zip: MIAMI, FL 33182

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: JOHN GARCIA

Electronic Signature of Signing Officer or Director

ST

01/08/2009

Date