

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90111 025 ****61.25

DOCUMENT # N01623

1. Entity Name
PRINCETONIAN HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**LAND CAP PROP. SERV.
13800 S.W. 144 AVE. ROAD
MIAMI, FL 33186 US**

Mailing Address
**LAND CAP PROP. SERV.
13800 S.W. 144 AVE. ROAD
MIAMI, FL 33186 US**

24044726



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01152004

Chg-NP

CR2E037 (10/03)

4. FEI Number
59-2390035

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEON-RUBIDO, MARLENE ESQ
8500 W FLAGLER ST
STE A-105
MIAMI, FL 33144**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME BRADEN, PHILLIP
STREET ADDRESS 25061 SW 125 CT.
CITY-ST-ZIP PRINCETON, FL 33032

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME RAMIREZ, FRANK
STREET ADDRESS 12581 SW 248 TERR
CITY-ST-ZIP PRINCETON, FL 33032

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME FISCHER, MICHELE
STREET ADDRESS 25081 SW 125 CT.
CITY-ST-ZIP PRINCETON, FL 33032

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME JUSTUS, XXXXX
STREET ADDRESS 12510 SW 251 TERRACE
CITY-ST-ZIP PRINCETON, FL 33032

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME RIVERA, CARLOS
STREET ADDRESS 20279 OLD CUTLER RD
CITY-ST-ZIP MIAMI, FL 33189

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Phillip Braden 3-21-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305-992-4351