

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 08, 2008
Secretary of State

DOCUMENT# N02000009767

Entity Name: THE CUTLER CAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7755 SW 192 STREET
CUTLER BAY, FL 33157

New Principal Place of Business:

Current Mailing Address:

7755 SW 192 STREET
CUTLER BAY, FL 33157

New Mailing Address:

FEI Number: 42-1625721 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BERGER, WILLIAM
100 WEST CYPRESS CREEK ROAD - SUITE 700
FORT LAUDERDALE, FL 33309 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: DP () Delete
Name: PATTERSON, TODD
Address: 19026 SW 76 AVENUE
City-St-Zip: CUTLER BAY, FL 33157

Title: VPD () Delete
Name: LEITH, GARRY
Address: 7876 SW 194 STREET
City-St-Zip: CUTLER BAY, FL 33157

Title: TD () Delete
Name: ADES, HARVEY
Address: 7438 SW 189 TERRACE
City-St-Zip: CUTLER BAY, FL 33157

Title: SD () Delete
Name: VEGA, OSCAR
Address: 18968 SW 80 COURT
City-St-Zip: CUTLER BAY, FL 33157

Title: D () Delete
Name: MALOOF, AL
Address: 19048 SW 80 COURT
City-St-Zip: CUTLER BAY, FL 33157

Title: D () Delete
Name: LESTER, ANTHONY
Address: 7863 SW 193 STREET
City-St-Zip: CUTLER BAY, FL 33157

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: D (X) Change () Addition
Name: ROBBINS, JOEL
Address: 7581 SW 191 STREET
City-St-Zip: CUTLER BAY, FL 33157

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: OSCAR VEGA

SD

10/08/2008

Electronic Signature of Signing Officer or Director

_____ Date