

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001046

FILED  
Mar 30, 2009  
Secretary of State

**Entity Name:** BUENA VIDA EAST HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1961 VIA BUENA VIDA  
WELLINGTON, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

1961 VIA BUENA VIDA  
WELLINGTON, FL 33411

**New Mailing Address:**

C/O CASTLE GROUP  
P.O. BOX 559009  
FT. LAUDERDALE, FL 33355

**FEI Number:** 42-1589604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAPLAN, LOUIS  
301 YAMATO RD STE 4150  
BOCA RATON, FL 33431 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: NISSNEBAUM, GINNY  
Address: 1909 VIA BELLEZZA E  
City-St-Zip: WELLINGTON, FL 33411

Title: VPD ( ) Delete  
Name: SCHWEITZER, BOB  
Address: 8913 VIA GRANDE E  
City-St-Zip: WELLINGTON, FL 33411

Title: STD ( ) Delete  
Name: LAUTENBACH, BUD  
Address: 8865 VIA GRANDE E  
City-St-Zip: WELLINGTON, FL 33411

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

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

Title: VPD (X) Change ( ) Addition  
Name: KAMINS, ALAN  
Address: 8549 BRILLIANTE  
City-St-Zip: WELLINGTON, FL 33411

Title: STD (X) Change ( ) Addition  
Name: MARGOLIN, MIKE  
Address: 8878 VIA BRILLIANTE  
City-St-Zip: WELLINGTON, FL 33411

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: ROBERT A. DONNELLY

MGR

03/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date