

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002834

FILED
Apr 07, 2009
Secretary of State

Entity Name: MURANO AT HAMPTON PARK NO. 8 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8540 SW 25TH COURT
MIRAMAR, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

8540 SW 25TH COURT
MIRAMAR, FL 33025 US

New Mailing Address:

FEI Number: 80-0065397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTHONY S. ADELSON, PA
501 GOLDEN ISLES DRIVE
SUITE 203
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

KATZMAN GARFINKEL
1501 NW 49TH STREET
2ND FLOOR
FT. LAUDERDALE, FL 33309 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: KATZMAN GARFINKEL

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMILEY, PAULETTE
Address: 2887 SW 83 TERRACE
City-St-Zip: MIRAMAR, FL 33025

Title: VPD () Delete
Name: TROCHE, DAWN
Address: 2741 SW 83RD TERRACE
City-St-Zip: MIRAMAR, FL 33025

Title: ST/D () Delete
Name: JOHNSON, FIONA
Address: 2681 SW 83 TERRACE
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST/D (X) Change () Addition
Name: JOSEPH, ROLGUINE
Address: 2665 SW 83RD TERR.
City-St-Zip: MIRAMAR, FL 33025

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: PAULETTE SMILEY

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date