

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003119

FILED
Feb 20, 2008
Secretary of State

Entity Name: FALCON ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11231 NW 18TH STREET
PLANTATION, FL 33323

New Principal Place of Business:

6530 GRIFFIN ROAD
SUITE 104
DAVIE, FL 33314

Current Mailing Address:

721 SE 15TH STREET #3
POMPAÑO BEACH, FL 33060

New Mailing Address:

6530 GRIFFIN ROAD
SUITE 104
DAVIE, FL 33314

FEI Number: 86-1057146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARDKIM LLLP
ONE FINANCIAL PLAZA
SUITE 2600
FORT LAUDERDALE, FL 33394 US

Name and Address of New Registered Agent:

FOUNDATION PROPERTY SERVICES
6530 GRIFFIN ROAD,
104
DAVIE, FL 33314 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: JANE BOLIN

02/20/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BAUER, PEGGY
Address: 11361 NW 18TH STREET
City-St-Zip: PLANTATION, FL 33323

Title: D () Delete
Name: FILLICHIO, BEN
Address: 11431 NW 18TH STREET
City-St-Zip: PLANTATION, FL 33323

Title: D () Delete
Name: LOSHIN, MARY
Address: 11430 NW 18TH STREET
City-St-Zip: PLANTATION, FL 33323

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:

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: JANE BOLIN FOR FPS

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02/20/2008

Electronic Signature of Signing Officer or Director

Date