

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 03, 2009
Secretary of State

DOCUMENT# N03000007513

Entity Name: CATALINA PLACE TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**11784 W. SAMPLE ROAD, #103
#103
CORAL SPRINGS, FL 33065**New Principal Place of Business:**10112 USA TODAY WAY
MIRAMAR, FL 33025**Current Mailing Address:**11784 W. SAMPLE ROAD, #103
#103
CORAL SPRINGS, FL 33065**New Mailing Address:**10112 USA TODAY WAY
MIRAMAR, FL 33025**FEI Number:** 54-2130163**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**UNITED COMMUNITY MANAGEMENT CORP.
11784 W. SAMPLE ROAD, #103
#103
CORAL SPRINGS, FL 33065 US**Name and Address of New Registered Agent:**ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025 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: GEORGE SKRBIN

12/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: MANDELL, JEFF
Address: 6547 CATALINA LANE
City-St-Zip: TAMARAC, FL 33321**Title:** D () Delete
Name: NELSON, NEIL
Address: 6458 CATALINA LANE
City-St-Zip: TAMARAC, FL 33321**Title:** TD () Delete
Name: DEWKINANDAN, MOHINI
Address: 6403 CATLINA LANE
City-St-Zip: TAMARAC, FL 33321**Title:** VPD () Delete
Name: PADILLA, JUAN
Address: 6502 CATALINA LANE
City-St-Zip: TAMARAC, FL 33321**Title:** D () Delete
Name: PARIS, RICHARD
Address: 6603 CATALINA LANE
City-St-Zip: TAMARAC, FL 33321**Title:** D () Delete
Name: PEMSINGH, NAVENDRA
Address: 6409 CATALINA LANE
City-St-Zip: TAMARAC, FL 33321**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
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City-St-Zip:**Title:** () Change () Addition
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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: JEFF MANDELL

PRES

12/03/2009

Electronic Signature of Signing Officer or Director

Date