

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007514

FILED
Apr 24, 2010
Secretary of State

Entity Name: SANTA BARBARA TOWNHOMES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALTON MADISON PROPERTY MANAGEMENT
381 N KROME AVENUE #205
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

PO BOX 901773
HOMESTEAD, FL 33090

New Mailing Address:

C/O ALTON MADISON PROPERTY MANAGEMENT
381 N KROME AVENUE #205
HOMESTEAD, FL 33030

FEI Number: 56-2397048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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: PD
Name: WHITE-PARKS, SARAH
Address: 21473 SW 85 PASSAGE
City-St-Zip: MIAMI, FL 33189

Title: SD
Name: SNAY, SHARON
Address: 21450 SW 86 PLACE
City-St-Zip: MIAMI, FL 33189

Title: D
Name: ORTIZ, ROSA
Address: 21497 SW 85 AVENUE
City-St-Zip: MIAMI, FL 33189

Title: VPD
Name: HAYNES, BEVERLY
Address: 21484 SW 85 PASSAGE
City-St-Zip: MIAMI, FL 33189

Title: TD
Name: KUPSKI, LISA
Address: 8562 SW 214 WAY
City-St-Zip: MIAMI, FL 33189

I hereby 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 all other like empowered.

SIGNATURE: SARAH WHITE PARKS

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04/24/2010

Electronic Signature of Signing Officer or Director

Date