2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# N04000000797

Entity Name: RANCHO ALEGRE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

900 N FEDERAL HWY SUITE 200
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

900 N FEDERAL HWY SUITE 200
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLOOMGARDEN, PAUL M
BLOOMGARDEN & ASSOCIATES, P.A.
8551 WEST SUNRISE BLVD., SUITE 208
FT. LAUDERDALE, FL 33322 US

Name and Address of New Registered Agent:

BUDOWSKY, ROBERT P
1550 N.E. MIAMI GARDENS DR.
N. MIAMI BEACH, FL 33162 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: ROBERT BUDOWSKY 01/06/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BERMAN, ALEGRE
Address: 900 N FEDERAL HWY SUITE 200
City-St-Zip: HALLANDALE, FL 33009

Title: VPD ( ) Delete
Name: BERMAN, JAC
Address: 900 N FEDERAL HWY SUITE 200
City-St-Zip: HALLANDALE, FL 33009

Title: STD ( ) Delete
Name: KRUPNICK, BRETT
Address: 900 N FEDERAL HWY SUITE 200
City-St-Zip: HALLANDALE, FL 33009

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 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: ALEGRE BERMAN PD 01/06/2006
Electronic Signature of Signing Officer or Director — Date