

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

03-20-2008 90028 044 ****70.00

DOCUMENT # N04000002275			
1. Entity Name VENTURA AT MALIBU BAY NEIGHBORHOOD ASSOCIATION, INC.			
Principal Place of Business 1020 NE 34 AVE HOMESTEAD, FL 33033		Mailing Address M&E ASSOCIATES 13055 SW 42 ST SUITE 203 MIAMI, FL 33175	
2. Principal Place of Business - No P.O. Box # 13055 SW 42 ST		3. Mailing Address	
Suite, Apt. #, etc. 203		Suite, Apt. #, etc.	
City & State Miami FL		City & State	
Zip 33175	Country Dade	Zip	Country
5. Name and Address of Current Registered Agent SKRLD, INC. 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES, FL 33134		7. Name and Address of New Registered Agent	
8. 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. I am familiar with, and accept the obligations of registered agent.		4. FEI Number 20-0826830	
SIGNATURE Signature, typed or printed name of registered agent and not applicable. (NOTE: Registered Agent signature required when renewing)		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FABRIZIA, BARELA 1203 NE 32 TERRACE HOMESTEAD, FL 33033 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Annette Angelotti 3283 NE 11 Drive HOMESTEAD FL 33033 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ANGELOTTI, ANNETTE 3283 NE 11 DRIVE HOMESTEAD, FL 33033 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SUMMERALTER, DIANA 3227 NE 11 DRIVE HOMESTEAD, FL 33033 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jesus Perez 150 NE 32 AVE HOMESTEAD FL 33033 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Managers		Date: 4/13/08 Daytime Phone: 305 5527855	