2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2009
Secretary of State

DOCUMENT# N04000003372

Entity Name: LONG LAKE RANCHES WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11011 SHERIDAN ST.
SUITE 208
COOPER CITY, FL 33026

New Principal Place of Business:

Current Mailing Address:

11011 SHERIDAN ST.
SUITE 208
COOPER CITY, FL 33026

New Mailing Address:

FEI Number: 20-0962001 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF
EMERALD LAKES CORP PARK
3111 STIRLING ROAD
FORT LAUDERDALE, FL 333126525 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: P ( ) Delete
Name: OSBER, STEVEN
Address: 11011 SHERIDAN ST. SUITE 208
City-St-Zip: COOPER CITY, FL 33026

Title: VS ( ) Delete
Name: LEON, SCOTT
Address: 11011 SHERIDAN ST. SUITE 208
City-St-Zip: COOPER CITY, FL 33026

Title: T ( ) Delete
Name: PIRZADA, NELOFUR
Address: 11011 SHERIDAN ST. SUITE 208
City-St-Zip: COOPER CITY, FL 33026

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

Title: D ( ) Change (X) Addition
Name: BARBETTA, JONETTE
Address: 11011 SHERIDAN ST. SUITE 208
City-St-Zip: WESTON, FL 33026

Title: D ( ) Change (X) Addition
Name: THOMPSON, FRED
Address: 11011 SHERIDAN ST. SUITE 208
City-St-Zip: COOPER CITY, FL 33026

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: TROY MODLIN PM 05/04/2009
Electronic Signature of Signing Officer or Director — Date