2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400003855

FILED Mar 02, 2009 Secretary of State

Entity Name: CAZADORES SUBDIVISION SOUTH HOMEOWNER'S ASSOCIATION. INC

Littly Na	ille. CAZADO	ORES SUBDIVISION SOUTHT	IOWILOWNER 3 ASSOCIATIO	N, INC	
Current P	rincipal Plac	e of Business:	New Principal Plac	New Principal Place of Business:	
11120 S.W SUITE 200 MIAMI, FL					
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
C/O PROF 8299 COR MIAMI, FL	RAL WAY	GEMENT SERVICES			
FEI Number	: 20-0776977	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
8299 COR SUITE 200 MIAMI, FL The above) 33155 US		ourpose of changing its registe	red office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LAO, MATILDE	S STREET, SUITE 200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PINA, EVELYN	S STREET, SUITE 200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CARDELLE, Y	3 STREET, SUITE 200	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MATILDE LAO P 03/02/2009