2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N0400005122 1. Entity Name VILLAS AT CORAL HEIGHTS HOMEOWNERS ASSOCIATION, INC.					FILED 08 JAM 15 PM 2: 06		
Principal Place of Business 1892 CORAL HEIGHTS LANE UNIT# 907 0AKLAND PARK, FL 33308-5220 Mailing Address -C/O KW PROPERTY MANAGE 396 ALHAMBRA CIRCLE, S CORAL GABLES, FL 3313			, SUITE 230-	G	ALLANDES TEGRID	: VA 	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address // 784 W. SAMPIERA 1784 Suite, Apt. #, etc.		AmpleRa			II BIKATI AT IJAH		
City & State	#103		#103	12212007 CF	ng-NP CR2E037 (12/06)	Applied For	
CORA!	Springs FL	City & State/ Sp	11ng St	20-342361	\$8.75 As	Not Applicable	
<u>3306</u>	6. Name and Address of Current F	33065 Registered Agent	USA	Certificate of St. Name and Add	atus Desired Fee Requir		
THE LAW OFFICES OF KATZMAN & KORR 1501 NORTHWEST 49TH STREET			Name Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
SUITE 202 FORT LAUDERDALE, FL 33309			1/78	11784 W. SAMPLE Rd # 103 CORA / Spungs FL 33065			
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 Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am familiar with accept the obligations of registered agent. SIGNATURE State of Plorida. I am fam							
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	Amended AR is \$61.25	Trust Fund C		\$5.00 May Be Added to Fees	Florida Department of	1	
10.	OFFICERS AND DIR	Trust Fund C	ontribution.	Added to Fees ADDITIONS/CHANG	Florida Department of S	State IN 10	
		Trust Fund C	ontribution.	Added to Fees ADDITIONS/CHANG VP ZARE 3951	Florida Department of: ES TO OFFICERS AND DIRECTORS I MOA Chester ORal Heights Ind PARK, FL3	State IN 10 Addition Way 3308	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIR DP POLEO, ROBERT 396 ALHAMBRA CIRCLE, SUITE CORAL GABLES, FL 33434 DVP RETTSTADT, BEVERLY 396 ALHAMBRA CIRCLE, SUITE	Trust Fund C	Ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS	Added to Fees ADDITIONS/CHANG VP ZARE 39510 Oakle ST	Florida Department of: ESTO OFFICERS AND DIRECTORS I MOA Chester ORal Heights Ind PARK, FL3 Change Coral Height	State IN 10 Addition Way 3308 Addition	
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