2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005122

FILED Mar 17, 2009 Secretary of State

Entity Name: VILLAS AT CORAL HEIGHTS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

11784 W SAMPLE RD #103

CORAL SPRINGS, FL 33065

New Mailing Address: Current Mailing Address:

11784 W SAMPLE RD #103

CORAL SPRINGS, FL 33065

FEI Number: 20-3423614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

UNITED COMMUNITY MANAGEMENT CORP. 11784 W SAMPLE RD #103 CORAL SPRINGS, FL 33065 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition ZAREMBA, CHESTER Name: ZAREMBA, CHESTER Name: 3951 CORAL HEIGHTS WAY Address: 3951 CORAL HEIGHTS WAY Address: City-St-Zip: OAKLAND PARK, FL 33308 City-St-Zip: OAKLAND PARK, FL 33308

Title: DST () Delete Title: SDTD (X) Change () Addition RETTSTADT, BEVERLY Name: RETTSTADT, BEVERLY Name: Address: 1802 CORAL HEIGHTS LANE Address: 1802 CORAL HEIGHTS LANE City-St-Zip: OAKLAND PARK, FL 33308 City-St-Zip: OAKLAND PARK, FL 33308

Title: () Delete Title: (X) Change () Addition

SCHNEIDER, CRAIG Name: JOHNSON, MARIE Name: 1912 CORAL HEIGHTS COURT 3991 CORAL HEIGHTS WAY Address: Address: City-St-Zip: OAKLAND PARK, FL 33308 City-St-Zip: OAKLAND PARK, FL 33308

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: MARY LOU PALMER **AGT** 03/17/2009