2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006061

FILED Jan 12, 2009 Secretary of State

Entity Name: SILVER FALLS TOWNHOMES OWNERS' ASSOCIATION, INC.

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

1495 NORTH PARK DRIVE 1495 NORTH PARK DRIVE WESTORT, FL 33326 WESTON, FL 33326

Current Mailing Address: New Mailing Address:

1495 NORTH PARK DRIVE 1495 NORTH PARK DRIVE WESTORT, FL 33326 WESTON, FL 33326

FEI Number: 20-1326348 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:

CENTURY MGMT. SERVICES INC

1495 NORTH PARK DRIVE

WESTORY, FL 33326 US

CENTURY MGMT. SERVICES INC

1495 NORTH PARK DRIVE

WESTON, FL 33326 US

WESTON, FL 33326 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: 01/12/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SUAREZ, ANGIE
 Name:
 TOYOS, SILVIA

 Address:
 4430 SW 125 LANE
 Address:
 4313 SW 124TH TERRACE

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

Title: DV () Delete Title: DV (X) Change () Addition Name: TOYOS, SILVIA Name: SUAREZ, ANGIE

 Name
 Name
 SOAREZ, ANGIE

 Address:
 4313 SW 124 TER
 Address:
 4430 SW 12TH LANE

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

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

 Name:
 MARCIELO, MARTINEZ
 Name:
 LEONIDES, ESPINAL

 Address:
 12483 SW 44 CT
 Address:
 4202 SW 124TH WAY

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

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: SILVIA TOYOS DP 01/12/2009