

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006251

FILED
Jan 14, 2009
Secretary of State

Entity Name: CUTLER LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O HARBOR MANAGEMENT SRVS, INC.
15600 SW 288 STREET #406
HOMESTEAD, FL 33033 US

New Principal Place of Business:

Current Mailing Address:

C/O HARBOR MANAGEMENT SRVS, INC.
P.O. BOX 924176
HOMESTEAD, FL 33092 US

New Mailing Address:

FEI Number: 20-3646123

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PIEDRA, AURELIO A
780 NW LEJEUNE RD
STE 516
MIAMI, FL 33126 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: WILLIAMS, GLENN W PRESIDE
Address: 15600 SW 288 STREET, #406
City-St-Zip: HOMESTEAD, FL 33033 US

Title: VP () Delete
Name: CLARK, TINA M VP
Address: 15600 SW 288 STREET, #406
City-St-Zip: HOMESTEAD, FL 33033 US

Title: S,T () Delete
Name: SERRANO, EVELYN M SEC, TR
Address: 15600 SW 288 STREET, #406
City-St-Zip: HOMESTEAD, FL 33033 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: CLARK, TINA M VP
Address: 15600 SW 288 STREET, #406
City-St-Zip: HOMESTEAD, FL 33033 US

Title: S (X) Change () Addition
Name: SERRANO, EVELYN M SEC, TR
Address: 15600 SW 288 STREET, #406
City-St-Zip: HOMESTEAD, FL 33033 US

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: GLENN WILLIAMS

P

01/14/2009

Electronic Signature of Signing Officer or Director

Date