

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008154

FILED
Jan 08, 2010
Secretary of State

Entity Name: THE RESERVE AT ISLES AT BAYSHORE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

M & E ASSOCIATES OF MIAMI, INC.
13055 SW 42 STREET, SUITE 203
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

M & E ASSOCIATES OF MIAMI, INC.
13055 SW 42 STREET, SUITE 203
MIAMI, FL 33175

New Mailing Address:

FEI Number: 20-1100564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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: MARIA ARIAS

01/08/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PASTORELLO, ANDREA
Address: 22221 SW 87 PLACE
City-St-Zip: CUTLER BAY, FL 33190

Title: VP
Name: TAYLOR, ALICIA
Address: 8775 SW 221 TERRACE
City-St-Zip: CUTLER BAY, FL 33190

Title: T
Name: RUIZ, STEVEN
Address: 8811 SW 220 STREET
City-St-Zip: CUTLER BAY, FL 33190

Title: S
Name: TOWSLEY, SHINJA
Address: 22251 SW 87 PLACE
City-St-Zip: CUTLER BAY, FL 33190

Title: D
Name: JONES, JENNIFER
Address: 8781 SW 220 STREET
City-St-Zip: CUTLER BAY, FL 33190

I hereby 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 all other like empowered.

SIGNATURE: ANDREA PASTORELLO

P

01/08/2010

Electronic Signature of Signing Officer or Director

Date