

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000009960

**FILED**  
**Jan 31, 2011**  
**Secretary of State**

**Entity Name:** UNIVERSITY LANDINGS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CCM, INC  
7124 N NOB HILL RD  
TAMARAC, FL 33321

**New Principal Place of Business:**

C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 N. NOB HILL RD  
TAMARAC, FL 33321

**Current Mailing Address:**

C/O CCM, INC  
7124 N NOB HILL RD  
TAMARAC, FL 33321

**New Mailing Address:**

C/O CONSOLIDATED COMMUNITY MANAGEMENT  
7124 N, NOB HILL RD  
TAMARAC, FL 33321

**FEI Number:** 20-3544072

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JENNINGS & VALANCY  
311 SE 13TH ST  
FT LAUDERDALE, FL 33316 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: PD  
Name: GREEN, MITZIE  
Address: 7124 N. NOB HILL RD  
City-St-Zip: TAMARAC, FL 33321

Title: V  
Name: OSORNO, CLEMENCIA  
Address: 7124 N. NOB HILL RD  
City-St-Zip: TAMARAC, FL 33321

Title: ST  
Name: MARTINEZ, PEDRO  
Address: 7124 N. NOB HILL RD  
City-St-Zip: TAMARAC, FL 33321

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: MITZIE GREEN

P

01/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date