

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003165

FILED  
Jan 05, 2009  
Secretary of State

Entity Name: THE COLONNADES ASSOCIATION, INC.

## Current Principal Place of Business:

701 N.W. 91ST TERRACE  
PLANTATION, FL 33324

## New Principal Place of Business:

## Current Mailing Address:

701 N.W. 91ST TERRACE  
PLANTATION, FL 33324

## New Mailing Address:

FEI Number: 20-2827708

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VALANCY, STEVEN S  
311 SE 13 ST  
FORT 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: VP ( ) Delete  
Name: SARGENT, DAMON  
Address: 846 NW 91 TERRACE  
City-St-Zip: PLANTATION, FL 33324

Title: PD ( ) Delete  
Name: SEIGEL, VICKI  
Address: 829 NW 91 TER  
City-St-Zip: PLANTATION, FL 33324

Title: TD ( ) Delete  
Name: BERMAN, KEVIN  
Address: 139790 NW 4 ST #106  
City-St-Zip: SUNRISE, FL 33325

Title: SD ( ) Delete  
Name: MILLER, IAN  
Address: 701 NW 91 TER  
City-St-Zip: PLANTATION, FL 33324

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: IAN, MILLER  
Address: 701 NW 91 TER  
City-St-Zip: PLANTATION, FL 33324

Title: VP (X) Change ( ) Addition  
Name: LEHAVOT, YORAM  
Address: 701 NW 91 TER  
City-St-Zip: PLANTATION, FL 33324

Title: TD (X) Change ( ) Addition  
Name: FERRO, RENZO  
Address: 701 NW 91 TER  
City-St-Zip: PLANTATION, FL 33324

Title: SD (X) Change ( ) Addition  
Name: LIPPMAN, ARLENE  
Address: 701 NW 91 TER  
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Change (X) Addition  
Name: AGUILAR, ADOLFO  
Address: 701 NW 91 TER  
City-St-Zip: PLANATION, FL 33324

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: JASON MASTER

PM

01/05/2009

Electronic Signature of Signing Officer or Director

Date