2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# N05000003216

Entity Name: WYNWOOD HISTORICAL HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

86 NW 33 ST.
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

86 NW 33 ST.
MIAMI, FL 33127

New Mailing Address:

FEI Number: 59-3802896 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

QUINONES, MARIANO
86 NW 33 ST.
MIAMI, FL 33127 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:	QUINONES, MARIANO	
Address:	86 NW 33 ST	
City-St-Zip:	MIAMI, FL 33127	
Title:	V	( ) Delete
Name:	FELICIANO, VIRGILIO	
Address:	80-82 NW 26 ST.	
City-St-Zip:	MIAMI, FL 33127	
Title:	S	( ) Delete
Name:	GUTIERREZ, ROSA	
Address:	102 NW 33 ST	
City-St-Zip:	MIAMI, FL 33127	
Title:	T	( ) Delete
Name:	QUINONES, EUSEBIA	
Address:	86 NW 33 ST	
City-St-Zip:	MIAMI, FL 33127	
Title:	D	( ) Delete
Name:	MACHADO, RAYMOND	
Address:	120 NW 34 ST	
City-St-Zip:	MIAMI, FL 33127	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MARIANO QUINONES P 04/26/2009

Electronic Signature of Signing Officer or Director — Date