

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006013

FILED
Feb 26, 2009
Secretary of State

Entity Name: MILAN BY LENNAR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12350 SW 132 CT
114
MIAMI, FL 33186

New Principal Place of Business:

10284 NW 32 TER
DORAL, FL 33172

Current Mailing Address:

12350 SW 132 CT
114
MIAMI, FL 33186

New Mailing Address:

C/O THE CONTINENTAL GROUP, INC.
11981 SW 144 CT STE#201
MIAMI, FL 33186

FEI Number: 20-2998860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA TORRE, HELIO
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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 () Delete
Name: ESPINOZA, FERNANDO
Address: 10336 NW 31 TERR
City-St-Zip: DORAL, FL 33178

Title: DVP () Delete
Name: ORTIZ, JUAN M
Address: 3271 NW 102 PL
City-St-Zip: DORAL, FL 33178

Title: DT () Delete
Name: CERVERA, MIGUEL A
Address: 3183 NW 103 CT
City-St-Zip: DORAL, FL 33178

Title: SD (X) Delete
Name: SAER, ANA
Address: 3175 NW 103 CT
City-St-Zip: DORAL, FL 33178

Title: D (X) Delete
Name: CORTES,, JORGE
Address: 10375 NW 30 TERR
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ESPINOSA, FERNANDO
Address: 10336 NW 31 TERR
City-St-Zip: DORAL, FL 33172

Title: DVP (X) Change () Addition
Name: ORTIZ, JUAN M
Address: 3271 NW 102 PL
City-St-Zip: DORAL, FL 33172

Title: DT (X) Change () Addition
Name: CERVERA, MIGUEL A
Address: 3183 NW 103 CT
City-St-Zip: DORAL, FL 33172

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: FERNANDEO ESPINOSA

PD

02/26/2009

Electronic Signature of Signing Officer or Director

Date