2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 03, 2008 8:00 am Secretary of State

DOCUMENT # N0500006711 1. Entity Name SAN MELLINA COMMUNITY HOMEOWNER'S ASSOCIATION, INC.				03-03-2	2008 90206 039 ****61	1.25	
Principal Place of Business 2840 UNIVERSITY DR. CORAL SPRINGS, FL 33065 Mailing Address 2840 UNIVERSITY DR. CORAL SPRINGS, FL 33065 CORAL SPRINGS, FL 3306					7/ Fa ir 18 / 18 / 1 8/ 1 7/ 18/ 18/ 18/		
		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01072008 Chg-NP	CR2E037 (12/06)		
City & State		City & State		4. FEI Number 20-4612069) 	lied For Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Des	ired S8.75 Additi	ional	
	6. Name and Address of Current R	Registered Agent		7. Name and Address of N	New Registered Agent		
GILLESPIE, R. BOWEN III			Name				
GILLESPIE, R. BOWEN III 1515 S. FEDERAL HWY., STE. 306 BOCA RATON, FL. 33432			Street Address (P.O. Box Number is Not Acceptable)				
\$ a			City		FL Zip Code		
	named entity submits this statement for lions of registered agent.	the purpose of changing its re	gistered office or regis	stered agent, or both, in the State	of Florida. I am familiar with, ar	nd accept	
SIGNATURE	Signature, typed or printed name of registered agent at	nd title if applicable. (NOTE: F	Registered Agent signature requi	ized when reinstating)	DATE		
			again a gamaga a saga		27172		
,	Filing Fee is \$61.25	9. Election Camp			Make check payable to	~	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make check payable to Florida Department of Stat	*	
10.	Due by May 1, 2008 OFFICERS AND DIR	9. Election Camp Trust Fund Co	paign Financing ntribution.	\$5.00 May Be Added to Fees	Make check payable to Florida Department of Star	0	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X (USEAN Millatte JOSEPII GUILLOTTE: 2/28/08 954 755-1775