

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006711

FILED  
Mar 14, 2012  
Secretary of State

**Entity Name:** SAN MELLINA HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1145 SAWGRASS CORP PKWY  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1145 SAWGRASS CORP PKWY  
SUNRISE, FL 33323

**New Mailing Address:**

**FEI Number:** 20-4612069

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIEGFREID, RIVERA, LERNER, DE LA TORRE & SOB  
201 ALHAMBRA CIRCLE  
SUITE 1102  
CORAL GABLE, 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:** P  
**Name:** DE BOCK, MICHAEL  
**Address:** 1145 SAWGRASS CORPORATE PARKWAY  
**City-St-Zip:** SUNRISE, FL 33323

**Title:** VP  
**Name:** GROSSWALD, DAN  
**Address:** 1145 SAWGRASS PARKWAY  
**City-St-Zip:** SUNRISE, FL 33323

**Title:** S  
**Name:** HUMPHRIES, MIKE  
**Address:** 1145 SAWGRASS CORPORATE PARKWAY  
**City-St-Zip:** SUNRISE, FL 33323

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:** MICHAEL DEBOCK

P

03/14/2012

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

\_\_\_\_\_  
Date