

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000059

FILED  
Mar 13, 2009  
Secretary of State

**Entity Name:** SUNDANCE TRAILS RANCH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129

**New Principal Place of Business:**

**Current Mailing Address:**

2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129

**New Mailing Address:**

FEI Number: 56-2554173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVID, MARY ANN  
2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129 US

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

KWIAT, ANDREW CFO  
2333 BRICKELL AVE  
STE D-1  
MIAMI, FL 33129 US

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: ANDREW KWIAT

03/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ROSEN, CLIFFORD D  
Address: 2333 BRICKELL AVE - STE D-1  
City-St-Zip: MIAMI, FL 33129

Title: STD ( ) Delete  
Name: KWIAT, ANDREW  
Address: 2333 BRICKELL AVE - STE D-1  
City-St-Zip: MIAMI, FL 33129

Title: VPD ( ) Delete  
Name: MARYANN, DAVID Y ESQ.  
Address: 2333 BRICKELL AVE, STE D-1  
City-St-Zip: MIAMI, FL 33129

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: VPD (X) Change ( ) Addition  
Name: WELLS, THOMAS  
Address: 550 SOUTH MAIN ST #400  
City-St-Zip: GREENVILLE, SC 29601

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: CLIFFORD D. ROSEN

MGR

03/13/2009

Electronic Signature of Signing Officer or Director

Date