

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000254

FILED  
Apr 17, 2009  
Secretary of State

**Entity Name:** MIRABELLA PROPERTY OWNERS ASSOCIATION, INC.("MASTER ASSOCIATION")

**Current Principal Place of Business:**

398 NE 6TH AVE  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

398 NE 6TH AVE  
DELRAY BEACH, FL 33483

**New Mailing Address:**

**FEI Number:** 56-2586291

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAKALAR & EICHNER, P.A.  
150 SOUTH PINE ISLAND ROAD  
SUITE 540  
PLANTATION, FL 33324 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: DP ( ) Delete  
Name: RICKARD, KEVIN  
Address: 398 NE 6TH AVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: DV ( ) Delete  
Name: HERNANDEZ, TIM  
Address: 398 NE 6TH AVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: DST ( ) Delete  
Name: LEVY, ROBERT A  
Address: 398 NE 6TH AVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: D ( ) Delete  
Name: SADKIN, S MARTIN  
Address: 7860 PETERS RD STE F-111  
City-St-Zip: PLANTATION, FL 33324

**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:

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: KEVIN RICKARD

PD

04/17/2009

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

\_\_\_\_\_  
Date