## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000000588

FILED Apr 25, 2007 Secretary of State

Entity Name: MAYO VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

20533 BISCYNE BOULEVARD 2560 NE 190 STREET SUITE 1242 3

AVENTURA, FL 33180 MIAMI, FL 33180

Current Mailing Address: New Mailing Address:

20533 BISCYNE BOULEVARD 2560 NE 190 STREET SUITE 1242 3

AVENTURA, FL 33180 MIAMI, FL 33180

FEI Number: 20-5698673 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AVENTURA, FL 33180 US MIAMI, FL 33180 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: DANIEL GAMBURD 04/25/2007

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: MGR (X) Change ( ) Addition

Name: SAIEGH, MARCELO Name: GAMBURD, DANIEL A
Address: 20533 BISCYNE BOULEVARD, SUITE 1242 Address: 2560 NE 190 STREET #3

City-St-Zip: AVENTURA, FL 33180 City-St-Zip: MIAMI, FL 33180

Title: VD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BOGOMOLNI, GUSTAVO
 Name:

 Address:
 20533 BISCYNE BOULEVARD, SUITE 1242
 Address:

 City-St-Zip:
 AVENTURA, FL 33180
 City-St-Zip:

Title: STD (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GAMBURD, DANIEL
 Name:

 Address:
 20533 BISCYNE BOULEVARD, SUITE 1242
 Address:

 City-St-Zip:
 AVENTURA, FL 33180
 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: DANIEL GAMBURD MGR 04/25/2007

Electronic Signature of Signing Officer or Director

Date