## **2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

## FILED Apr 14, 2008 8:00 am Secretary of State 04-14-2008 90056 038 \*\*\*\*61.25

## DOCUMENT # N06000005661

1. Entity Name



IVIAISTINI	QUE NO. Z	·	IVI ASSC	OCIATION, IN							
Principal Place 8151 PETER CROSSROAD PLANTATION	S BLDG #2		8151 CROS	g Address I PETERS ROAD SSROADS BLDG #2 ITATION, FL 3332		,	HIII   HIII		88    88    88  <b> </b>	84110 <b>8</b> 1111 <b>8</b> 1111 11	Birbi bi 4001
	AN AGENER	T, INC .	MIA	ing Address HI HAN AGE	HENT, INC	ر.					
1145 SAL	UGLASS CL	ep prwy	1145	SAWGRASS	CORP PKL	ey_		hg-NP	CR2E	037 (12/06)	
SUN RIS	SE PL	,	3บผู้	y & State USE FL			4. FEI Number 20-507378	37		1 1-	pplied For ot Applicable
z 3337	23	Country USA	Zic	33323	Country		5. Certificate of S	tatus Desire	a 🗆	\$8.75 Ad Fee Require	
		d Address of Current	t Registere	d Agent	Name	-	7. Name and Add	dress of Nev	v Registered	l Agent ≛	
150 SOUT	: & EICHNER TH PINE ISLA :-33324	, P.A. ND RD, SUITE 5 PIANTATION,	40 E/ 3:	8324	Street	Address (I	P.O. Box Number is	Not Accepta	ible)		
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8 The above	named actives	bmits this statement for	or the purp	and at abadding its	registered office	vase	change	the Ciete of	Florida (as	_	
	tions of registere		or me purp	ose of changing its	registered office	orregister	ed agent, <b>p</b> riboth, it	rine state of	Florida. Tar	n tamıllar with	, and accept
SIGNATURE	Signature, typed or pr	inled name of registered agen	t and title il app	olicable. (NOTE	: Registered Agent sign.	alure required	when reinstating)		DATÉ		
	Filing Fee i Due by May			9. Election Cam Trust Fund C	npaign Financing Contribution.		\$5.00 May Be Added to Fees	\$4.0 °. 1865 F		ck payable artment of S	
10.	Due by May		IRECTORS	Trust Fund C				<u> </u>	lorida Depa	ertment of S	itate
10. TITLE NAME	-	0 1, 2008 OFFICERS AND DI	IRECTORS		Contribution.	Juli	Added to Fees ADDITIONS/CHANG	SES TO OFFI	Orida Depa	ertment of S	itate
TITLE	Due by May	OFFICERS AND DI MARLENE ROAD 84	IRECTORS	Trust Fund C	11. TITLE	Juli IP 1145	Added to Fees  ADDITIONS/CHANG  DIEZ  (ALWAY45)	Corp.	Orida Depa	IRECTORS I	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP SCHRAGER. 8190 STATE DAVIE, FL 3	OFFICERS AND DI MARLENE ROAD 84 3324	IRECTORS	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Juli DP 1148 Sunri	Added to Fees  ADDITIONS/CHANC  O DIEZ  Sawgrass  Sawgrass	Corp.	Orida Depa	IRECTORS I	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP SCHRAGER. 8190 STATE DAVIE, FL 3 DVP PAPALE, MK 8151 PETER	OFFICERS AND DI MARLENE ROAD 84 3324 CHAEL S ROAD	IRECTORS	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Juli DP 1148 Sunra DVF	Added to Fees  ADDITIONS/CHANG  O DIEZ  SALVYYASI  SE FL 333	Corp.	CERS AND C	DIRECTORS II	N 10
ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP SCHRAGER. 8190 STATE DAVIE, FL 3 DVP PAPALE, MK	OFFICERS AND DI MARLENE ROAD 84 3324 CHAEL S ROAD	IRECTORS	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Juli DP 1148 Sunra DVF	Added to Fees  ADDITIONS/CHANCE  O DIEZ  Sawgrass  I'ra Daes Sawgrass Se FL 33	Corp.	CERS AND C	DIRECTORS II Change	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Due by May  DP  SCHRAGER,  8190 STATE  DAVIE, FL 3  DVP  PAPALE, MIC  8151 PETER  PLANTATIOI  DST  CUMMINGS.	MARLENE ROAD 84 3324  CHAEL S ROAD N, FL 33324  KENDALL	IRECTORS	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Juli DP 1148 Sunr DVF Yand 1145 Sunn DST	Added to Fees  ADDITIONS/CHANCE O DIEZ  Sawgrass isc FL 333  TO DAES Sawgrass SE FL 33  SSO Polve	Corp. H	CERS AND C	DIRECTORS II	N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Due by May  DP  SCHRAGER,  8190 STATE  DAVIE, FL 3  DVP  PAPALE, MIC  8151 PETER  PLANTATION  DST	MARLENE ROAD 84 3324  CHAEL S ROAD N, FL 33324  KENDALL S ROAD	RECTORS	Trust Fund C	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Juli DP 1148 Sonri DVF Yani 1145 Sonni DST	Added to Fees  ADDITIONS/CHANG O DIEZ  Sawgrass isc Fl 333  ira Daes Sawgrass Se Fl 33	Corp. H	CERS AND C	DIRECTORS II Change	N 10
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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.

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TYPED OR PRINTED IN ONE OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #