

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 24, 2008
Secretary of State

DOCUMENT# N06000005915

Entity Name: FLORINDA ESTATE HOA, INC.

Current Principal Place of Business:8766 NW 139 STREET
MIAMI LAKES, FL 33018 US**New Principal Place of Business:****Current Mailing Address:**8766 NW 139 STREET
MIAMI LAKES, FL 33018 US**New Mailing Address:**

FEI Number: 57-1237197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:FARIAS, MIGUEL J
8766 NW 139 STREET
MIAMI LAKES, FL 33018 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 () Delete
Name: FARIAS, MIGUEL J
Address: 8766 NW 139 STREET
City-St-Zip: MIAMI LAKES, FL 33018 USTitle: VP () Delete
Name: MENDEZ, ROLDAN R
Address: 8766 NW 139 STREET
City-St-Zip: MIAMI LAKES, FL 33018 USTitle: S () Delete
Name: MENENDEZ, PIEDAD
Address: 8766 NW 139 STREET
City-St-Zip: MIAMI LAKES, FL 33018 USTitle: T () Delete
Name: OCAMPO, PATRICIA
Address: 8766 NW 139 STREET
City-St-Zip: MIAMI LAKES,, FL 33018 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: S (X) Change () Addition
Name: DOBRILLA, JOHN H
Address: 8867 NW 139 TERRACE
City-St-Zip: MIAMI LAKES, FL 33018 USTitle: T (X) Change () Addition
Name: CHAIDEZ, LUIS
Address: 8857 NW 139 TERRACE
City-St-Zip: MIAMI LAKES,, FL 33018 US

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: MIGUEL J FARIAS

P

01/24/2008

Electronic Signature of Signing Officer or Director

Date