

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2008 8:00 am
Secretary of State

05-21-2008 90023 039 ****61.25

DOCUMENT # N06000008787

1. Entity Name
MURANO HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**4788 WEST COMMERCIAL BLVD
FORT LAUDERDALE, FL 33319**

Mailing Address
**4788 WEST COMMERCIAL BLVD
FORT LAUDERDALE, FL 33319**



2. Principal Place of Business - No P.O. Box #

J+L Property MGMT

Suite, Apt. #, etc.
#203

City & State
Coral Springs, FL

Zip
33065

Country
USA

3. Mailing Address

10191 W. Sample Rd

Suite, Apt. #, etc.
#203

City & State
Coral Springs FL

Zip
33065

Country
USA

04112008 Chg-NP CR2E037 (12/06)

4. FEI Number
87-0786473

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**HOME DYNAMICS MURANO, LLC
4788 WEST COMMERCIAL BLVD
FORT LAUDERDALE, FL 33319**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

| | | |
|----------------|---------------------------|--|
| TITLE | PD | <input checked="" type="checkbox"/> Delete |
| NAME | SCHACK, MICHAEL | |
| STREET ADDRESS | 4788 WEST COMMERCIAL BLVD | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33319 | |
| TITLE | VD | <input type="checkbox"/> Delete |
| NAME | DELFINO, ALEJANDRO | |
| STREET ADDRESS | 4788 WEST COMMERCIAL BLVD | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33319 | |
| TITLE | ST | <input type="checkbox"/> Delete |
| NAME | HANLEY, MICHAEL | |
| STREET ADDRESS | 4788 WEST COMMERCIAL BLVD | |
| CITY-ST-ZIP | FORT LAUDERDALE, FL 33319 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|----------------------------------|---|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Lopez, Carlos | |
| STREET ADDRESS | 4788 West Commercial Blvd | |
| CITY-ST-ZIP | Tamara, FL 33319 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #