2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010505

FILED Mar 13, 2009 Secretary of State

Entity Name: SORRENTO TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

urrent P	Principal Place	of Business:	New Principal Place of	of Business:	
UITE #30	47TH AVENUE 07 UDERDALE, FL	33314	7900 NW 155 STREET SUITE #205 MIAMI LAKES, FL 330		
urrent N	Mailing Addres	s:	New Mailing Address	::	
UITE #30	47TH AVENUE 07 UDERDALE, FL	33314	7900 NW 155 STREET SUITE #205 MIAMI LAKES, FL 330		
El Number	: 20-5876924	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
TRAUS,		•			
UITE C EMBROI	IES BOULEVAF KE PINES, FL 3	33024 US	nurnose of changing its registered	I office or registered agent, or both	
UITE C EMBROI he above	IES BOULEVAF KE PINES, FL 3	33024 US	purpose of changing its registered	d office or registered agent, or both,	
UITE C EMBROI he above the Stat	IES BOULEVAR KE PINES, FL 3 e named entity s e of Florida.	33024 US	purpose of changing its registered	d office or registered agent, or both,	
UITE C EMBROI he above the State	IES BOULEVAR KE PINES, FL 3 e named entity s e of Florida. RE:	33024 US		d office or registered agent, or both, Date	
UITE C EMBROI he above the Stati	IES BOULEVAR KE PINES, FL 3 e named entity s e of Florida. RE:	33024 US ubmits this statement for the positions of Registered Ag	ent		
UITE C EMBROI he above the Stati	IES BOULEVAR KE PINES, FL 3 e named entity s e of Florida. RE: Electroni S AND DIRECT	ubmits this statement for the particle of Registered Agrons: Delete A AVENUE #307	ent ADDITIONS/CHANGE	Date	
EUITE C EMBROI he above the State IGNATU PFFICER tte: ame: ddress:	IES BOULEVAR KE PINES, FL 3 e named entity s e of Florida. RE: Electroni S AND DIRECT D () SPEAR, DAVID. 3721 SW 47TH. FORT LAUDERE	ubmits this statement for the particle of Registered Agrons: Delete A AVENUE #307 DALE, FL 33314 Delete EY AVENUE #307	ent ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	Date ES TO OFFICERS AND DIRECTOR	

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: DAVID SPEAR D 03/13/2009