2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N07000000614

Entity Name: STRANAHAN ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

500 W SUNRISE BLVD
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

500 W SUNRISE BLVD
FT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHAPNICK, MICHAEL E ESQ.
100 EAST LINTON BLVD.
SUIT 402-B
DELRAY BEACH, FLORIDA, FL 33483 US

Name and Address of New Registered Agent:

CHAPNICK, MICHAEL E ESQ.
100 EAST LINTON BLVD.
SUIT 502-B
DELRAY BEACH, FLORIDA, FL 33483 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: _____ 05/01/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DORSEY, JENNIFER
Address: 525 S.W. 20TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: DS ( ) Delete
Name: SWEET, SHARONE
Address: 543 S.W. 20TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: DT ( ) Delete
Name: MOWATT, JULIA
Address: 555 S.W. 20TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: MICHAEL E CHAPNICK, ESQ. RA 05/01/2009
Electronic Signature of Signing Officer or Director — Date