

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90021 044 ****70.00

DOCUMENT # N07784

1. Entity Name

RICHMOND HEIGHTS HOMEOWNERS ASSOCIATION INC.



Principal Place of Business

13900 HARRISON ST.
MIAMI FL 33176

Mailing Address

13900 HARRISON ST.
MIAMI FL 33176

2. Principal Place of Business

11225 S.W. 153 AVE-NOE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33157

Country

Dr dc

Zip

Country

4. FEI Number

59-2502219

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

MARSHALL, JAMES
13900 HARRISON STREET
MIAMI FL 33176

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 ☐ Delete
NAME **P MARSHALL, JAMES L**
STREET ADDRESS **13900 HARRISON STREET**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
NAME **V ROBERSON, NED**
STREET ADDRESS **11501 SW 142 ST**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE ☐ Delete
NAME **S CRUZ, MARGARET L.**
STREET ADDRESS **14541 MONROE ST**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
NAME **CODY, SHARON LEE**
STREET ADDRESS **1425 SW 105 COURT**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE ☐ Delete
NAME **C BEMBRY, WILLIE**
STREET ADDRESS **11512 SW 136 TERRACE**
CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
NAME **D RICHARDSON, PEARLY**
STREET ADDRESS **14641 SW 106 AVE.**
CITY-ST-ZIP **MIAMI FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **T CORDY, Sharon Lee**
STREET ADDRESS **14525 S.W. 105 COURT**
CITY-ST-ZIP **Miami Fla. 33176**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 Section 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

2/7/2006 305-235-7731

Date

Daytime Phone #