

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08435

FILED
Jan 06, 2010
Secretary of State

Entity Name: CHARDONNAY TOWNHOUSES HOMEOWNERS' ASSOCIATION INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT INC
14275 SW 142 AVE
MIAMI, FL 33186 US

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI MANAGEMENT INC
14275 SW 142 AVE
MIAMI, FL 33186 US

New Mailing Address:

FEI Number: 65-0254282 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

TRIAY, CARLOS A
2301 NW 87 AVE
SUITE 501
DORAL, FL 33172 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: PD
Name: ALLBRITTON, RICHARD
Address: CHARDONNAY C/O MMI 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33186

Title: VPD
Name: ACOSTA, HEIDI
Address: CHARDONNAY C/O MMI 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33186

Title: SD
Name: RAMIREZ, PERLA
Address: CHARDONNAY C/O MMI 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33176

Title: TD
Name: PENA, ARTURO
Address: CHARDONNAY C/O MMI 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33176

Title: D
Name: QUINTANS, MARTHA
Address: CHARDONNAY C/O MMI 14275 SW 142 AVE.
City-St-Zip: MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: RICHARD ALLBRITTON

PRES

01/06/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date