

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10965

FILED
Jan 14, 2009
Secretary of State

Entity Name: SOUTHVIEW AT AVENTURA MASTER ASSOCIATION, INC.

Current Principal Place of Business:

3440 NE 192 STREET
AVENTURA, FL 33180 US

New Principal Place of Business:

3400 NE 192ND STREET
AVENTURA, FL 33180 US

Current Mailing Address:

3400 NE 192ND ST.
MANAGEMENT OFFICE
MIAMI, FL 33180 US

New Mailing Address:

3400 NE 192ND STREET
AVENTURA, FL 33180 US

FEI Number: 59-2574459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDALL K ROGER & ASSOCIATES, PA.
621 NW 53 ST.
#300
BOCA RATON, FL 33487 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 () Delete
Name: WEINBERGER, MORTON
Address: 3400 NE 192 STREET #1809
City-St-Zip: AVENTURA, FL 33180 US

Title: STD () Delete
Name: DELPINO, ROBERTO
Address: 3440 NE 192 STREET #A5H
City-St-Zip: AVENTURA, FL 33180 US

Title: VP () Delete
Name: TORRES, JOHN
Address: 3440 NE 192ND SR #A4N
City-St-Zip: AVENTURA, FL 33180

Title: D (X) Delete
Name: LEVITT, SONNY
Address: 3400 N.E. 192ND ST
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WEINBERGER, MORTON
Address: 3400 NE 192ND STREET #1809
City-St-Zip: AVENTURA, FL 33180 US

Title: VP (X) Change () Addition
Name: TORRES, JOHN
Address: 3440 NE 192ND SR #A4N
City-St-Zip: AVENTURA, FL 33180 US

Title: D (X) Change () Addition
Name: LEVITT, SONNY
Address: 3400 N.E. 192ND ST. #708
City-St-Zip: AVENTURA, FL 33180

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: MORTON WEINBERGER

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date