

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007907

FILED  
Jul 10, 2012  
Secretary of State

**Entity Name:** DANIELA SPRINGS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5240 S UNIVERSITY DR SUITE 102  
DAVIE, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

5240 S UNIVERSITY DR SUITE 102  
DAVIE, FL 33328

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRECKER, CHARLES D ESQ  
200 E LAS OLAS BLVD SUITE 2100  
FT LAUDERDALE, FL 33301 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: CAMET, EDUARDO  
Address: 5240 S UNIVERSITY DR SUITE 102  
City-St-Zip: DAVIE, FL 33328

Title: VPD  
Name: PRIOIETTO, MILTON  
Address: 5240 S UNIVERSITY DR SUITE 102  
City-St-Zip: DAVIE, FL 33328

Title: STD  
Name: CAMET, SOLANGE B  
Address: 5240 S UNIVERSITY DR SUITE 102  
City-St-Zip: DAVIE, FL 33328

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: EDUARDO CAMET

PD

07/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date