

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 02, 2009**  
**Secretary of State**

DOCUMENT# N11383

**Entity Name:** FRANKLIN FARMS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**9421 BELAIRE DRIVE  
MIRAMAR, FL 33025 US**New Principal Place of Business:****Current Mailing Address:**9421 BELAIRE DRIVE  
MIRAMAR, FL 33025 US**New Mailing Address:****FEI Number:** 59-2611056**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GLAZER & ASSOCIATES, P.A.  
3113 STIRLING ROAD  
SUITE 201  
HOLLYWOOD, FL 33021 US**Name and Address of New Registered Agent:**GLASER, DENISE L  
9421 BELAIRE DRIVE  
MIRAMAR, FL 33025 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: DENISE L GLASER

08/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SIMON, RONALD  
Address: 9410 CHELSA DRIVE  
City-St-Zip: MIRAMAR, FL 33025

Title: VD ( ) Delete  
Name: MYERS, PHYLISS  
Address: 9320 DUNHILL DRIVE  
City-St-Zip: MIRAMAR, FL 33025

Title: STD ( ) Delete  
Name: GLASER, DENISE  
Address: 9421 BELAIRE DRIVE  
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete  
Name: MCKIE, CHRISTOPHER  
Address: 2341 FAIRMONT AVENUE  
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete  
Name: VERNON, HERMAN  
Address: 9321 CHELSEA DRIVE  
City-St-Zip: MIRAMAR, FL 33025

**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:

Title: D (X) Change ( ) Addition  
Name: ALLEN, JOAN R  
Address: 9300 CHELSEA DRIVE  
City-St-Zip: MIRAMAR, FL 33025

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: DENISE GLASER

STD

08/02/2009

Electronic Signature of Signing Officer or Director

Date