## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N15113

FILED Mar 26, 2009 Secretary of State

Entity Name: EMERALD OAKS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	ROWARD BLV	′D.			
PH1 PLANTATI	ION, FL 33324	US			
Current M	lailing Addres	s:	New Maili	ng Address:	
3211 W. B	ROWARD BLV	′D.			
PH1 PLANTATI	ION, FL 33324	US			
El Number	: 59-2722406	FEI Number Applied For ( )	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
2699 STIR SUITE C-2	& OTTO, P.A. LING ROAD 207 ERDALE, FL 3	3312 US			
	named entity se of Florida.	ubmits this statement for the p	ourpose of changing it	s registered office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS	S AND DIREC	rors:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: Dity-St-Zip:	D () WACKER, ELLE 3519 GEELIEF HOLLYWOOD,	CIR.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Γitle: Name:	TARAN, ADAM 3441 LAUREL L	Delete ANE FL 33024 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
	HOLLI WOOD,				
City-St-Zip: Fitle: Name: Address:	_	O OAKS DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: City-St-Zip:	D () SCHNEIDER, H 3479 EMERALD HOLLYWOOD,	OPE DOAKS DRIVE FL 33021 US Delete ANE	Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition  PD (X) Change ( ) Addition FRANCO, MICHELE 3431 WATER OAKS DRIVE HOLLYWOOD, FL 33021 US	
City-St-Zip:  Vitie:  Valame:  Valdress:  City-St-Zip:  Vitie:  Valame:  Valdress:	D () SCHNEIDER, HO 3479 EMERALD HOLLYWOOD, TD () FORNO, DICK 3565 ARBOR LA HOLLYWOOD,	OPE D OAKS DRIVE FL 33021 US Delete ANE FL 33021 US Delete	Name: Address: City-St-Zip: Title: Name: Address:	PD (X) Change ( ) Addition FRANCO, MICHELE 3431 WATER OAKS DRIVE	

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: MICHELE FRANCO PD 03/26/2009