2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 16, 2009
Secretary of State

DOCUMENT# N21365

Entity Name: FALCON'S LEA PATIO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

14950 NORFOLK LANE
DAVIE, FL 33331 US

New Principal Place of Business:

Current Mailing Address:

14950 NORFOLK LANE
DAVIE, FL 33331 US

New Mailing Address:

FEI Number: 65-0026751 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SANFORD, JEFF
6111 SWINDEN LANE
DAVIE, FL 33331 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: P ( ) Delete
Name: SANFORD, JEFF
Address: 6111 SWINDEN LANE
City-St-Zip: DAVIE, FL 33331 US

Title: S ( ) Delete
Name: SKINKIS, HEATHER
Address: 15210 NORFOLK LANE
City-St-Zip: DAVIE, FL 33331 US

Title: T ( ) Delete
Name: BUCKLEY, CHRISTINE
Address: 15221 NORFOLK LANE
City-St-Zip: DAVIE, FL 33331 US

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:

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: CHRISTINE BUCKLEY T 09/16/2009

Electronic Signature of Signing Officer or Director — Date