

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24504

FILED
Feb 04, 2009
Secretary of State

Entity Name: QUATRAINE THREE - PHASE 1 HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11606 NW 19TH DR
POMPANO BEACH, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 770850
CORAL SPRINGS, FL 33077 US

New Mailing Address:

FEI Number: 65-0020967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPNICK COMM. ASSC. LAW P.A.
100 EAST LINTON BLVD
SUITE 102 B
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

SIEGFRIED, RIVERA & LERNER
8211 W. BROWARD BLVD
250
PLANTATION, FL 33324 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: HOWARD SIEGFRIED

02/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SANCHEZ, ANTONIO & LISA
Address: 843 NW 98 AVE
City-St-Zip: PLANTATION, FL 33324

Title: VD () Delete
Name: VIANDS, ROBERT
Address: 2950 N 28 TERRACE
City-St-Zip: HOLLYWOOD, FL 33020

Title: XS () Delete
Name: BERNHARD, SHARI
Address: 2950 N 28 TERRACE
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: SKAAR, JENE
Address: 9958 NW 9 CT
City-St-Zip: PLANTATION, FL 33324

Title: P () Delete
Name: STULGIS, TERRY
Address: 2950 N 28 TERRACE
City-St-Zip: HOLLYWOOD, FL 33020

Title: T () Delete
Name: KARR, VIVIAN
Address: 883 NW 99 AVE
City-St-Zip: PLANTATION, FL 33324

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: () Change () Addition
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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: TERRY STULGIS

P

02/04/2009

Electronic Signature of Signing Officer or Director

Date