

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26663

FILED
Apr 05, 2010
Secretary of State

Entity Name: OLD CUTLER COVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11981 SW 144 CT
#201
MIAMI, FL 33186 US

New Principal Place of Business:

5805 BLUE LAGOON DR.
#310
MIAMI, FL 33126 US

Current Mailing Address:

11981 SW 144 CT
#201
MIAMI, FL 33186 US

New Mailing Address:

5805 BLUE LAGOON DR.,
#310
MIAMI, FL 33126 US

FEI Number: 65-0099436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROGEL, DAVID
BECKER & POLIAKOFF
121 ALHAMBRA PLAZA, 10TH
CORAL GABLES, FL 33134 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: SHELOWITZ, PAUL
Address: 14891 SW 75 CT
City-St-Zip: MIAMI, FL 33158

Title: TD
Name: FISHMAN, JAMES M
Address: 14871 SW 75 CT
City-St-Zip: MIAMI, FL 33158

Title: SD
Name: CHOMIACK, KAREN
Address: 14910 SW 75 CT
City-St-Zip: MIAMI, FL 33158

Title: VPD
Name: LARRIEU, JORGE
Address: 14461 SW 76 AVE
City-St-Zip: MIAMI, FL 33158

Title: D
Name: ANDERSON, KELLY
Address: 15001 SW 75 CT
City-St-Zip: MIAMI, FL 33158

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: PAUL SHELOWITZ

PD

04/05/2010

Electronic Signature of Signing Officer or Director

Date