

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27023

FILED
Feb 16, 2009
Secretary of State

Entity Name: THE SPANISH RIVER VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

1527 SW FIRST AVE
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

1527 SW FIRST AVE
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 65-0056050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWERS, SEAN
1527 SW 1ST AVE
BOCA RATON, FL 33432 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 () Delete
Name: ESCALANTE, LOUIS
Address: 1516 S.W. 1ST AVE.
City-St-Zip: BOCA RATON, FL 33432

Title: SD () Delete
Name: DICKSON, ALEX
Address: 1535 SW 1ST AVE
City-St-Zip: BOCA RATON, FL 33432

Title: TD () Delete
Name: POWERS, SEAN
Address: 1527 SW 1ST AVE
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NAGDEMAN, CARY
Address: 149 SW 15TH DR.
City-St-Zip: BOCA RATON, FL 33432

Title: SD (X) Change () Addition
Name: JAWDE, RANIA
Address: 1508 SW 1ST AVE
City-St-Zip: BOCA RATON, FL 33432

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: SEAN POWERS

TD

02/16/2009

Electronic Signature of Signing Officer or Director

Date