# 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Aug 17, 2009**
**Secretary of State**

DOCUMENT# N27484

**Entity Name:** MEDITERRANEAN VILLAGE MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

3700 ISLAND BOULEVARD
OFFICE
AVENTURA, FL 33160 US

**New Principal Place of Business:**

**Current Mailing Address:**

3700 ISLAND BOULEVARD
OFFICE
AVENTURA, FL 33160 US

**New Mailing Address:**

**FEI Number: 65-0071231** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GLAZER, ERIC ESQ.
3113 STIRLING ROAD #201
HOLLYWOOD, FL 33312 US

**Name and Address of New Registered Agent:**

SUTTIN, DORIS PRES.
3700 ISLAND BOULEVARD
OFFICE
AVENTURA, FL 33160 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: DORIS SUTTIN, PRESIDENT 08/17/2009
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: SUTTIN, DORIS
Address: 3900 ISLAND BLVD B203
City-St-Zip: AVENTURA, FL 33160

Title: VP ( ) Delete
Name: WARD, JIM
Address: 3500 ISLAND BLVD. D102
City-St-Zip: AVENTURA, FL 33160

Title: D ( ) Delete
Name: KRAMARZ, HENRY
Address: 3900 ISLAND BLVD B308
City-St-Zip: AVENTURA, FL 33160

Title: T ( ) Delete
Name: GROSS, LAWRENCE
Address: 3700 ISLAND BLVD. CPH2
City-St-Zip: AVENTURA, FL 33160

Title: S ( ) Delete
Name: BLACK, SHIRLEY
Address: 3700 ISLAND BLVD C301
City-St-Zip: AVENTURA, FL 33160

**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
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: DORIS SUTTIN PRES 08/17/2009
Electronic Signature of Signing Officer or Director Date