

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28188

FILED
May 01, 2011
Secretary of State

Entity Name: CENTENNIAL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

381 N KROME AVENUE
SUITE 205
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

381 N KROME AVENUE
SUITE 205
HOMESTEAD, FL 33030 US

New Mailing Address:

FEI Number: 65-0071993 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MOTYCZKA, WILLIAM J PA
13410 SW 128 STREET
MIAMI, FL 33186 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: TD
Name: REBUTH, RICHARD
Address: 8586 SW 208 ST.
City-St-Zip: MIAMI, FL 33189

Title: D
Name: GOW, JAMES
Address: 381 N KROME AVNEUE #205
City-St-Zip: HOMESTEAD, FL 33030

Title: D
Name: POPE, RANDY
Address: 8593 SW 211 TERR
City-St-Zip: MIAMI, FL 33189

Title: SD
Name: VICOTRIA, S
Address: 8646 SW 208 TERRACE
City-St-Zip: MIAMI, FL 33189

Title: PD
Name: CRUSE, DAVID
Address: 8585 SW 208 STREET
City-St-Zip: MIAMI, FL 33189

Title: D
Name: PEREMENIS, JOHN
Address: 381 N KROME AVNEUE #205
City-St-Zip: HOMESTEAD, FL 33030

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: DAVID CRUSE

P

05/01/2011

Electronic Signature of Signing Officer or Director

_____ Date