

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28188

FILED  
Apr 30, 2012  
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: 381 N KROME AVENUE, SUITE 205  
City-St-Zip: HOMESTEAD, FL 33030

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

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

Title: SD  
Name: GARCIA, DEBORAH  
Address: 381 N KROME AVENUE, SUITE 205  
City-St-Zip: HOMESTEAD, FL 33030

Title: PD  
Name: CRUSE, DAVID  
Address: 381 N KROME AVENUE, SUITE 205  
City-St-Zip: HOMESTEAD, FL 33030

Title: D  
Name: SMITH, CASEY  
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

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date