

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29022

FILED
Mar 24, 2009
Secretary of State

Entity Name: ANGELICA GARDENS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

8440 NW 190 TERR
MIAMI, FL 330155370 US

New Principal Place of Business:

Current Mailing Address:

8440 NW 190 TERR
MIAMI, FL 330155370 US

New Mailing Address:

FEI Number: 65-0133276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC
201 ALHAMBRA CIRCLE, SUITE 1102
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 () Delete
Name: PERULLAS, MIGUEL
Address: 19045 NW 85 AVENUE
City-St-Zip: MIAMI, FL 33015

Title: VD () Delete
Name: HEALY, JOHN F III
Address: 8497 NW 191 STREET
City-St-Zip: MIAMI, FL 33015

Title: TD () Delete
Name: NORDHAGEN, DAVID
Address: 8489 NW 191 STREET
City-St-Zip: MIAMI, FL 33015

Title: SD () Delete
Name: BSALES, ALEX
Address: 18810 NW 84 AVENUE
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: GOMEZ, RICHARD
Address: 8600 NW 190 TERRACE
City-St-Zip: MIAMI, FL 33015

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: JOHN F HEALY III

VP

03/24/2009

Electronic Signature of Signing Officer or Director

Date