2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29491

Apr 01, 2009 Secretary of State

Entity Name: SONATA AT MISSION BAY ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** POINTE MANAGEMENT GROUP 75 NE 6TH AVE. SUITE 206 DELRAY BEACH, FL 33483 US **New Mailing Address: Current Mailing Address:** POINTE MANAGEMENT GROUP 75 NE 6TH AVE. SUITE 206 DELRAY BEACH, FL 33483 US FEI Number: 65-0130820 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ESTEBANEZ, ERIC 75 NE 6TH AVE 206 DELRAY BEACH, FL 33483 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KAHN, JAMES Name: Name: 10840 HAYDN DRIVE Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: BELKNAP, JOHN Name: NIEPORENT, RON Address: 20323 MONTEVERDI CIRCLE Address: 20335 MONTEVERDI CIRCLE City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33498 Title: () Delete Title: () Change () Addition ONTANO, RAUL Name: Name: 20317 MONTEVERDI CIRCLE Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TWAITE, JAMES Name: Address: 10871 HAYDN DRIVE Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition GUILLOTE, MIKE GUILLOTE, MIKE Name: Name: 20311 MONTEVERDI CIR 20311 MONTEVERDI CIR Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: BOCA RATON, FL 33498

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: JAMES KAHN Ρ 04/01/2009