

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29623

FILED
Mar 10, 2009
Secretary of State

Entity Name: ELAN AT CALUSA CONDOMINIUM XIII ASSOCIATION, INC.

Current Principal Place of Business:

C/O T & G MANAGEMENT SERVICES, INC.
18001 PALMETTO BAY 5521
PALMETTO BAY, FL 33157 US

New Principal Place of Business:

9415 SUNSET DRIVE.
149
MIAMI, FL 33173 US

Current Mailing Address:

C/O T & G MANAGEMENT SERVICES, INC.
18001 PALMETTO BAY 5521
PALMETTO BAY, FL 33157 US

New Mailing Address:

9415 SUNSET DRIVE.
149
MIAMI, FL 33173 US

FEI Number: 65-0108114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLASSFORD, DALE
12928 SW 133 COURT
SUITE N
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

FEIN & MELONI PA
900 SW 40TH AVE
PLANTATION, FL 33325 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: FEIN & MELONI PA

03/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLOREZ, WILSON
Address: 13071 SW 88 TERR S
City-St-Zip: MIAMI, FL 33186

Title: TD () Delete
Name: HUDSON, MARJORIE
Address: 13053 SW 88 TERR S
City-St-Zip: MIAMI, FL 33186

Title: SD () Delete
Name: BASS, MARSH
Address: 13049 SW 88 TERR. SO.
City-St-Zip: MIAMI, FL 33186

Title: SD () Delete
Name: EDUARDO, DERRIOS
Address: 13073 SW 88 TERRACE SO.
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLOREZ, WILSON
Address: 9415 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: TD (X) Change () Addition
Name: HUDSON, MARJORIE
Address: 9415 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: SD (X) Change () Addition
Name: BASS, MARSH
Address: 9415 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

Title: SD (X) Change () Addition
Name: EDUARDO, DERRIOS
Address: 9415 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33173

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: WILSON FLORES

PD

03/10/2009

Electronic Signature of Signing Officer or Director

Date