

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32423

FILED
Jan 06, 2010
Secretary of State

Entity Name: OSPREY AT SAWGRASS MILLS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT
1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323 US

New Principal Place of Business:

Current Mailing Address:

C/O MIAMI MANAGEMENT
1145 SAWGRASS CORP PKWY
SUNRISE, FL 33323 US

New Mailing Address:

FEI Number: 65-0155328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 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: KOLKER, SONDR
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: SD
Name: SANCHEZ, JOHN B
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: PD
Name: TUNON, JEANNE
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: DONDZIL, TED
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: D
Name: ROTHFIELD, NORM
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

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: JEANNE TUNON

PD

01/06/2010

Electronic Signature of Signing Officer or Director

Date