

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0027993

DOCUMENT # N33541

1. Entity Name

GALLOWAY AND MILLER ESTATES HOMEOWNERS ASSOCIATION, INC.



FILED

04 MAR 23 PH 1:47

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

6800 SW 40TH STREET
P.O. BOX 141
MIAMI FL 33155
US

Mailing Address

6800 SW 40TH ST.
P.O. BOX 141
MIAMI FL 33155
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0286998

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

PINEIRO, EDUARDO
8841 SW 58 STREET
MIAMI FL 33173

7. Name and Address of New Registered Agent

Name

Luis M. Mata

Street Address (P.O. Box Number Is Not Acceptable)

5680 SW 88 PL.

City

Miami

FL

Zip Code

33173

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME RODRIGUEZ, MANNY
STREET ADDRESS 5955 SW 88TH PLACE
CITY-ST-ZIP MIAMI FL 33173 ☐ Delete

TITLE VD
NAME MEDENES, ANTONIO
STREET ADDRESS 8825 SW 60TH STREET
CITY-ST-ZIP MIAMI FL 33173 ☐ Delete

TITLE SD
NAME SEGARRA, SERGIO
STREET ADDRESS 5986 SW 88 PLACE
CITY-ST-ZIP MIAMI FL 33173 ☐ Delete

TITLE TD
NAME MADRENO, CARMEN
STREET ADDRESS 8540 SW 60TH STREET
CITY-ST-ZIP MIAMI FL 33173 ☐ Delete

TITLE T
NAME MATA, LUIS M
STREET ADDRESS 5680 SW 88TH PLACE
CITY-ST-ZIP MIAMI FL 33173 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS 500031289515
CITY-ST-ZIP 03/26/04--01097--014 **61.25 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE MATA, LUIS
NAME
STREET ADDRESS 5680 SW 88TH PLACE (Correction)
CITY-ST-ZIP Miami, FL 33173 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

CR2E037 (10/02)