

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34169

FILED
Apr 17, 2009
Secretary of State

Entity Name: RIVER RUN OF MIRAMAR GARDEN HOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2731 RIVER RUN TERRACE
MIRAMAR, FL 33025 US

New Principal Place of Business:

1145 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323 US

Current Mailing Address:

1145 SAWGRASS CORPORATE PKWY
SUNRISE, FL 33323 US

New Mailing Address:

1145 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33323

FEI Number: 65-0186889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKALAR, EICHNOR P.A.
150 S. PINE ISLAND RD, STE 540
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

BAKALAR, EICHNER P.A.
150 S. PINE ISLAND RD, STE 540
PLANTATION, FL 33324 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: MICHAEL BAKALAR

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DE LEON, BEVERLY
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: T () Delete
Name: LINDO, JENNIFFER
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: S () Delete
Name: CHENESE, REMA
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: VP () Delete
Name: RAYNOR, JACQUILINE
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

Title: D (X) Delete
Name: YPSILANTIS, WILLIAM
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: YPSILANTIS, WILLIAM
Address: 1145 SAWGRASS CORP PKWY
City-St-Zip: SUNRISE, FL 33323

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: BEVERLY DE LEON

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date