

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37044

FILED
Jul 05, 2007
Secretary of State

Entity Name: THE ARBORETUM HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE
SUITE 420
MIAMI, FL 33133 US

New Principal Place of Business:

2525 PONCE DE LEON BOULEVARD
SUITE 700
CORAL GABLES, FL 33134 US

Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE
SUITE 420
MIAMI, FL 33133 US

New Mailing Address:

2525 PONCE DE LEON BOULEVARD
SUITE 700
CORAL GABLES, FL 33134 US

FEI Number: 65-0243752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SEROTA, GAIL D
2665 SOUTH BAYSHORE DRIVE
SUITE 420
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

SEROTA, GAIL D
2525 PONCE DE LEON BOULEVARD
SUITE 700
CORAL GABLES, FL 33134 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: _____

07/05/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: SEROTA, GAIL D
Address: 2665 SOUTH BAYSHORE DRIVE, SUITE 420
City-St-Zip: MIAMI, FL 33133 US

Title: V/D () Delete
Name: SHAPIRO, SUSAN K
Address: 10102 SW 57 COURT
City-St-Zip: MIAMI, FL 33156 US

Title: S/D () Delete
Name: BASS, CYNTHIA C
Address: 10140 SW 57 COURT
City-St-Zip: MIAMI, FL 33156 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: SEROTA, GAIL D
Address: 2525 PONCE DE LEON BOULEVARD
City-St-Zip: CORAL GABLES, FL 33134 US

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: GAIL D. SEROTA

P/D

07/05/2007

Electronic Signature of Signing Officer or Director

Date