2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37948

FILED Mar 31, 2009 Secretary of State

Entity Name: HIBISCUS ISLAND MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:
1941 NW 1	LE MANAGEMENT INC 150 AVE OOD, FL 33028 US	C/O LANDMARK MANAGEMENT INC 1941 NW 150 AVE HOLLYWOOD, FL 33028 US
Current Mailing Address:		New Mailing Address:
1941 NW 1	LE MANAGEMENT INC 150 AVE DOD, FL 33028 US	C/O LANDMARK MANAGEMENT INC 1941 NW 150 AVE HOLLYWOOD, FL 33028 US
FEI Number:	65-0164753 FEI Number Applied For	() FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of Current Registered Age	ent: Name and Address of New Registered Agent:
150 SOUT FORT LAU	& EICHNER H PINE ISLAND, SUITE 540 IDERDALE, FL 33324 US	or the purpose of changing its registered office or registered agent, or both,
	e of Florida.	in purpose of changing its registered effect of registered agent, or betti,
SIGNATUR		
	Electronic Signature of Register	ed Agent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D () Delete WINCELE, HOWARD 1344 BAYVIEW CIR WESTON, FL 33326	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P () Delete ALSPECTOR, ROBERT 1324 BAYVIEW CIR FORT LAUDERDALE, FL 33326	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete KOWALESKI, ANTHONY 1209 BAYVIEW CIR FORT LAUDERDALE, FL 33326	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address:	D () Delete LACENTRA, MARY 1232 BAYVIEW CIR FORT LAUDERDALE, FL 33326	Title: () Change () Addition Name: Address: City-St-Zip:
City-St-Zip:	TORT ENOBERBALE, TE 00020	
	D () Delete SWITALSKI, DAVID 1328 BAYVIEW CIR FORT LAUDERDALE, FL 33326	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: ROBERT ALSPECTOR P 03/31/2009