## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N38975

FILED Jan 07, 2009 Secretary of State

Entity Name: ENCINO AT GRAND PALMS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

 MIAMI MGMT
 GRAND PALMS

 15805 SW 11 ST
 15805 SW 11 ST

HOLLYWOOD, FL 33027 PEMBROKE PINES, FL 33027

Current Mailing Address: New Mailing Address:

15805 SW 11 ST GRAND PALMS
PEMBROKE, FL 33027 GRAND PALMS
15805 SW 11 ST

PEMBROKE PINES, FL 33027

FEI Number: 65-0276077 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TRIAY, CARLOS A ESQ NACHMAN, IRVIN 999 PONCE DE LEON BLVD., SUITE 1110 4441 STIRLING ROAD

CORAL GABLES, FL 33134 US FT. LAUDERDALE, FL 33314 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: IRVIN NACHMAN 01/07/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: () Change () Addition

 Name:
 REIDY, JAMES
 Name:

 Address:
 1622 SOUTHWEST 149 AVENUE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33027
 City-St-Zip:

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition

Name: SAMMARCO, LINDA Name: MILLER, MORGAN

Address: 14903 ENCINO CIRCLE NORTH Address: 525 ENCINO CIRCLE WEST City-St-Zip: PEMBROKE PINES, FL 33027 City-St-Zip: PEMBROKE PINES, FL 33027

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GOTHELF, RENEE
 Name:

 Address:
 1648 SOUTHWEST 148 TERRACE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33027
 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: RENEE GOTHELF PRES 01/07/2009