

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39445

FILED
Jan 04, 2010
Secretary of State

Entity Name: BLUEGRASS LAKES COMMUNITY MASTER ASSOCIATION, INC.

Current Principal Place of Business:

C/O MIAMI MANAGEMENT INC.
1145 SAWGRASS CORP. PKWY
SUNRISE, FL 33323 US

New Principal Place of Business:

UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD #103
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

C/O MIAMI MANAGEMENT INC.
1145 SAWGRASS CORP. PKWY
SUNRISE, FL 33323 US

New Mailing Address:

UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD #103
CORAL SPRINGS, FL 33065 US

FEI Number: 59-2420161

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:

UNITED COMMUNITY MANAGEMENT CORP.
11784 WEST SAMPLE ROAD
103
CORAL SPRINGS, FL FL 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: RENEE CAMPBELL

01/04/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: MOURAD, BAHAA
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065

Title: V
Name: DAVIDSON, RICARDO
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S
Name: NEWHART, MAX
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065

Title: T
Name: BRYANT, LINDA
Address: 11784 WEST SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D
Name: PAGAN, CARLOS
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D
Name: RAMESSAR, MIKE
Address: 11784 WEST SAMPLE ROAD #103
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby 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 all other like empowered.

SIGNATURE: MARY LOU PALMER

AGT

01/04/2010

Electronic Signature of Signing Officer or Director

Date