

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 23, 2009
Secretary of State

DOCUMENT# N40050

Entity Name: POINCIANA AT OAKS LANDING HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**14275 SW 142 AVE
MIAMI, FL 33186 US**New Principal Place of Business:****Current Mailing Address:**14275 SW 142 AVE
MIAMI, FL 33186 US**New Mailing Address:****FEI Number:** 29-1297458**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TRIAY, CARLOS A ESQ.
2301 NW 87 AVE
SUITE #501
MIAMI, FL 33172 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: ALE, GUSTAVO
Address: 14275 SW 142 AVE
City-St-Zip: MIAMI, FL 33186**Title:** VP () Delete
Name: RANGAL, CARLOS
Address: 14275 SW 142 AVE
City-St-Zip: MIAMI, FL 33186**Title:** T () Delete
Name: BOFILL, JUAN
Address: 14275 SW 142 AVE
City-St-Zip: MIAMI, FL 33186**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** S () Change (X) Addition
Name: FUENTES, JOSE
Address: 14275 SW 142 AVE
City-St-Zip: MIAMI, FL 33186

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: GUSTAVO ALE

P

07/23/2009

Electronic Signature of Signing Officer or Director

Date