

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43700

FILED
Jan 07, 2009
Secretary of State

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

Current Principal Place of Business:

MIAMI MANAGEMENT
15805 SW 11 ST
PEMBROKE PINES, FL 33027 US

New Principal Place of Business:

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

Current Mailing Address:

MIAMI MANAGEMENT
15805 SW 11 ST
PEMBROKE PINES, FL 33027 US

New Mailing Address:

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

FEI Number: 65-0283173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, MORGAN
1525 ENCINOCIRCLE WEST
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

NACHMAN, IRVIN
4111 STIRLING RAOD
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:

Title: VP () Delete
Name: BERMAN, SANFORD
Address: 1489 SW 151 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D () Delete
Name: COVENCY, BARBARA
Address: 1523 SW 151 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: T () Delete
Name: MILLER, MORGAN
Address: 1525 ENCINO CIRCLE WEST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BERMAN, SANFORD
Address: 1489 SW 151 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: T (X) Change () Addition
Name: COVENCY, BARBARA
Address: 1523 SW 151 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: P (X) Change () Addition
Name: MILLER, MORGAN
Address: 1525 ENCINO CIRCLE WEST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: S () Change (X) Addition
Name: GREENE, NANCY
Address: 1487 ENCINO CIRCLE WEST
City-St-Zip: PEMBROKE PINES, FL 33027

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: MORGAN MILLER

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date