

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001611

FILED
Apr 23, 2009
Secretary of State

Entity Name: DAVIS ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4532 SW 37 AVE.
FT. LAUDERDALE, FL 33312 US

New Principal Place of Business:

Current Mailing Address:

4532 SW 37 AVENUE
FORT LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 65-0408389 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JASON, GEORGE
4549 SW 37 AVE.
FORT LAUDERDALE, FL 33312 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: VP () Delete
Name: CONNELL, JAMES
Address: 3811 SW 47 COURT.
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: VD () Delete
Name: PFENNIGER, DORIS
Address: 4613 SW 37 AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: PD () Delete
Name: JASON, GEORGE
Address: 4549 SW 37 AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: TD () Delete
Name: METSCHER, ANN
Address: 4548 SW 37 AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

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: () 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: ANN METSCHER

TD

04/23/2009

Electronic Signature of Signing Officer or Director

Date