

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005635

FILED
Mar 02, 2009
Secretary of State

Entity Name: SAN MATEO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6801 NW 77 AVE
205
MIAMI, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

C/O RENOVATIONS PM
P.O. BOX 940218
MIAMI, FL 33194 US

New Mailing Address:

FEI Number: 65-0493877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RENOVATIONS PROPERTY MNG
6801 NW 77 AVE, #205
MIAMI, FL 33166 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: CARCAMO, OSMAN
Address: 14411 COMMERCE WAY SUITE 240
City-St-Zip: MIAMI LAKES, FL 33016

Title: S () Delete
Name: LOPEZ, VICTOR
Address: 14411 COMMERCE WAY SUITE 240
City-St-Zip: MIAMI LAKES, FL 33016

Title: TD () Delete
Name: CORREA, REYNA
Address: 17580 NW 76TH CT
City-St-Zip: MIAMI LAKES, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CARCAMO, OSMAN
Address: 6801 NW 77 AVE #205
City-St-Zip: MIAMI, FL 33166

Title: S (X) Change () Addition
Name: LOPEZ, VICTOR
Address: 6801 NW 77 AVE #205
City-St-Zip: MIAMI, FL 33166

Title: TD (X) Change () Addition
Name: CORREA, REYNA
Address: 6801 NW 77 AVE #205
City-St-Zip: MIAMI, FL 33166

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: OSMAN CARCAMO

P

03/02/2009

Electronic Signature of Signing Officer or Director

_____ Date