

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000085

FILED
Apr 12, 2009
Secretary of State

Entity Name: POINT LAKE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

P. O. BOX 831235
MIAMI, FL 33283 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 831235
MIAMI, FL 33283 US

New Mailing Address:

FEI Number: 65-0458589 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIAIY, CARLOS A
3750 N.W. 87 AVENUE
SUITE 100
MIAMI, FL 33178 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,D () Delete
Name: VILA, ROBERTO
Address: 13215 SW 45 TERRACE
City-St-Zip: MIAMI, FL 33175

Title: VP,D () Delete
Name: BUNTEN, HELEN
Address: 7640 SW 153 COURT,UNIT 102
City-St-Zip: MIAMI, FL 33193

Title: T,D () Delete
Name: LOPEZ, MARIAN
Address: 7640 SW 153 COURT, UNIT 107
City-St-Zip: MIAMI, FL 33193

Title: S,D () Delete
Name: ODDO, EMILIANO
Address: 15385 SW 76 TERRACE, #101
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: PEREZ, RAFAEL
Address: 15350 SW 76 TERRACE, UNIT 207
City-St-Zip: MIAMI, FL 33193

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:

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: ROBERTO VILA

P,D

04/12/2009

Electronic Signature of Signing Officer or Director

Date