

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000559

FILED  
Apr 02, 2012  
Secretary of State

**Entity Name:** THE ISLAND AT SPRING VALLEY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

MIAMI MANAGEMENT  
1145 SAWGRASS CORP. PKWY  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

MIAMI MANAGEMENT  
1145 SAWGRASS CORP. PKWY  
SUNRISE, FL 33323

**New Mailing Address:**

**FEI Number:** 65-0594584

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ESTINGER, BROWN, LEWIS & FRANKEL, P.A.  
ATTN: DENNIS J. EISINGER, ESQUIRE  
4000 HOLLYWOOD BOULEVARD SUITE 265-S  
HOLLYWOOD, FL 33021 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: PD  
Name: BRUMAGE, BRIAN  
Address: 1145 SAWGRASS CORP PKWY  
City-St-Zip: SUNRISE, FL 33323

Title: VPD  
Name: WILSON, DENNIS  
Address: 1145 SAWGRASS CORP PKWY  
City-St-Zip: SUNRISE, FL 33323

Title: TS  
Name: CALLE, IVETTE  
Address: 1145 SAWGRASS CORP PKWY  
City-St-Zip: SUNRISE, FL 33323

I hereby 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 all other like empowered.

SIGNATURE: MEGAN LINGERFELT

CAM

04/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date