

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N94000002103

1. Entity Name
OLD CUTLER GLEN HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
9000 SW 152 STREET
SUITE 102
MIAMI, FL 33157

Mailing Address
9000 SW 152 STREET
SUITE 102
MIAMI, FL 33157

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01032008 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0504264

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCOTT, FOSTER J
9000 SW 152 STREET
SUITE 102
MIAMI, FL 33157

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD
NAME STEINGOLD, MARSHALL
STREET ADDRESS 7751 SW 185 STREET
CITY-ST-ZIP MIAMI, FL 33157

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

FRED HERLING
8013 SW 186 ST.
MIAMI, FL 33157

Change Addition

TITLE VPD
NAME KLINE, JEFFREY
STREET ADDRESS 7973 SW 187 STREET
CITY-ST-ZIP MIAMI, FL 33157

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ADRIANA M. LAY
8046 SW 185th Terrace
miami, FL 33157

Change Addition

TITLE PD
NAME FANFANI, STEFANO
STREET ADDRESS 7991 SW 186 ST
CITY-ST-ZIP MIAMI, FL 33157

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE SD
NAME MARDEN, MARILYN
STREET ADDRESS 18430 SW 78 PLACE
CITY-ST-ZIP MIAMI, FL 33157

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE Fred Herling
NAME
STREET ADDRESS 8013 SW 186 ST.
CITY-ST-ZIP MIAMI, FL 33157

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marshall* *Marshall Stangl TD*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11

FILED
Jan 16, 2008 8:00 am
Secretary of State

01-16-2008 90023 015 ****61.25