

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 06, 2007
Secretary of State**

DOCUMENT# N94000003489

Entity Name: CAPISTRANO HOMES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3017 SW 115 AVE
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

3017 SW 115 AVE
MIAMI, FL 33165

New Mailing Address:

FEI Number: 65-0583770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAWSON, SMITH A III
3029 SW 113 AVE
MIAMI, FL 33165 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 () Delete
Name: PENA, MARIA E
Address: 3005 SW 115TH. AVENUE
City-St-Zip: MIAMI, FL 33165

Title: VPSD () Delete
Name: DAWSON, SMITH A III
Address: 3029 SW 115 AVENUE
City-St-Zip: MIAMI, FL 33165

Title: TD () Delete
Name: CEBALLOS, IVAN
Address: 3017 SW 115 AVENUE
City-St-Zip: MIAMI, FL 33165

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: IVAN V. CEBALLOS

TD

02/06/2007

Electronic Signature of Signing Officer or Director

_____ Date