2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400005362

FILED Jan 12, 2009 Secretary of State

Entity Name: CRITERION ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
5760 SW MIAMI, FL	107TH ST . 33156 US					
Current Mailing Address:			New Maili	New Mailing Address:		
5760 SW 107 ST MIAMI, FL 33156 US				5760 SW 107TH ST MIAMI, FL 33156 US		
FEI Number	r: 65-0554608	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and	d Address of	New Registered Agent:	
ROSSO, c 5760 SW MIAMI, FL	107 ST . 33156 US	submits this statement for the n	urnose of changing	ite registered	office or registered agent, or b	ooth
	e of Florida.	submits this statement for the pr	arpose or changing	its registered	office of registered agent, or b	Otili,
SIGNATU	RE:					
	Electron	ic Signature of Registered Age	nt		Date	
OFFICER	S AND DIREC	TORS:	ADDITION	NS/CHANGE	S TO OFFICERS AND DIREC	TORS
Title: Name: Address: City-St-Zip:	DP () DAHAN, SIMON 5791 SW 107TI MIAMI, FL 331:	H STREET	Title: Name: Address: City-St-Zip:	1	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DT () ROSSO, JORG 5760 SW 107 S MIAMI, FL 331	ST.	Title: Name: Address: City-St-Zip:	DST ROSSO, JOF 5760 SW 103 MIAMI, FL 33	7 ST.	
Title: Name: Address: City-St-Zip:	DS () TYSON, CHER 5700 SW 107TI MIAMI, FL 331:	H STREET	Title: Name: Address: City-St-Zip:	DS MIRANDA, KA 5761 SW 101 MIAMI, FL 33	7TH STREET	
Title: Name: Address: City-St-Zip:	DT () MAS, ILDEFON 5730 SW 107 S MIAMI, FL 331	ST	Title: Name: Address: City-St-Zip:	,	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () MACMICHAEL, 5701 SW 107 S MIAMI, FL 331	ST	Title: Name: Address: City-St-Zip:	,	()Change ()Addition	
Title:	()	Delete	Title:	DVP MIRANDA, JE	() Change (X) Addition	

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: JORGE L. ROSSO DST 01/12/2009