

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000360

FILED
Apr 29, 2008
Secretary of State

Entity Name: GALLOWAY ACRES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9833 SW 92 AVE
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

9833 SW 92 AVE
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0549264

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTEVEZ, KATHRYN K
9833 SW 92 AVE
MIAMI, FL 33176 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: DP () Delete
Name: ESTEVEZ, KATHRYN
Address: 9833 SW 92 AVE.
City-St-Zip: MIAMI, FL 33176

Title: DVP () Delete
Name: FERNANDEZ, MARIO
Address: 9000 SW 96 ST.
City-St-Zip: MIAMI, FL 33176

Title: DT () Delete
Name: REBOSO, MARIA
Address: 9855 SW 92 AVE
City-St-Zip: MIAMI, FL 33176

Title: DS (X) Delete
Name: WOODWARD, JOHN
Address: 9000 SW 96 ST.
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: GARAVITO, EVILIO
Address: 8895 SW 96 ST
City-St-Zip: MIAMI, FL 33176

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: KATHRYN ESTEVEZ

DP

04/29/2008

Electronic Signature of Signing Officer or Director

Date