

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 25, 2009
Secretary of State**

DOCUMENT# N95000000862

Entity Name: SIERRA RIDGE CONDOMINIUM E-1 ASSOCIATION, INC.

Current Principal Place of Business:

% 21300 N.E. 10TH AVENUE
N. MIAMI BEACH, FL 33179

New Principal Place of Business:

21300 N.E. 10TH AVENUE
N. MIAMI BEACH, FL 33179

Current Mailing Address:

P.O. BOX 69-4416
MIAMI, FL 33269

New Mailing Address:

FEI Number: 65-0541941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICE OF KATZMAN & KORR,P.A.
1501 NORTHWEST 49TH STREET
SUITE 202
FORT LAUDERDALE, FL 33309 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: VALDES, SANDRA
Address: 21230 NE 9 CT 3
City-St-Zip: NO. MIAMI BEACH, FL 33179

Title: SD () Delete
Name: DAVIS, TIFFANY
Address: 21220 NE 9TH PLACE #1
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: T () Delete
Name: FRAY, BEVERLY
Address: 21275 NE 9 CT 1
City-St-Zip: MIAMI, FL 33179

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 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: SANDRA VALDES

PD

03/25/2009

Electronic Signature of Signing Officer or Director

Date