2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001633

FILED Jan 06, 2011 Secretary of State

Entity Name: THE FALLS MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O SIGNATURE PROP. MGMT. GROUP 304 INDIAN TRACE #107 WESTON, FL 33326 US

Current Mailing Address: New Mailing Address:

C/O SIGNATURE PROP. MGMT. GROUP 304 INDIAN TRACE #107 WESTON, FL 33326 US

FEI Number: 65-0565877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SIGNATURE PROPERTY MANAGEMENT GROUP INC 304 INDIAN TRACE ROAD PMB107 WESTON, FL 33326 US

SIGNATURE PROPERTY MANAGEMENT GROUP INC 304 INDIAN TRACE #107 WESTON, FL 33326 US

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: 01/06/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: MADELYN, STEFFEN
Address: 1166 FALLS BLVD
City-St-Zip: WESTON, FL 33327 US

Title: D

Name: JENKINS, AIMEE R Address: 862 BRIAR RIDGE ROAD City-St-Zip: WESTON, FL 33327 US

Title: SD

Name: WEINTRAUB, SUZANNE
Address: 1128 CEDAR FALLS DRIVE
City-St-Zip: WESTON, FL 33327 US

Title: TD

 Name:
 BENNETT, ARNOLD

 Address:
 1180 FALLS BLVD

 City-St-Zip:
 WESTON, FL 33327 US

Title:

Name: SHAFFER, SUSANA
Address: 752 SAND CREEK CIRCLE
City-St-Zip: WESTON, FL 33327 US

I hereby 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 all other like empowered.

SIGNATURE: MADELYN STEFFEN PD 01/06/2011