

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004222

FILED  
Apr 29, 2010  
Secretary of State

**Entity Name:** MIRASOL PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

21045 COMMERCIAL TRL  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

21045 COMMERCIAL TRL  
STE 200  
BOCA RATON, FL 33486 US

**New Mailing Address:**

**FEI Number:** 65-0676073      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

ISAACSON, WILLIAM  
21045 COMMERCIAL TRL  
BOCA RATON, FL 33486 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: D  
Name: GORDON, CALVERT  
Address: 16379 MIRASOL WAY  
City-St-Zip: DELRAY BEACH, FL 33446

Title: TS  
Name: LEFF, STEPHEN  
Address: 16378 MIRASOL WAY  
City-St-Zip: DELRAY BEACH, FL 33446

Title: D  
Name: TELTSE, CIS  
Address: 16299 MIRASOL WAY  
City-St-Zip: DELRAY BEACH, FL 33446

Title: P  
Name: MAGER, ARLENE  
Address: 16306 MIRASOL WAY  
City-St-Zip: DELRAY BEACH, FL 33446

Title: S  
Name: MILLER, CAROL  
Address: 16339 MIRASOL WAY  
City-St-Zip: DELRAY BEACH, FL 33446

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: ARLENE MAGER

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04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date