
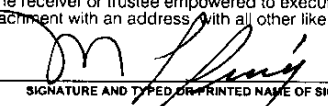


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90111 001 ****61.25

DOCUMENT # N96000003813					
1. Entity Name J.G. HEADS FARM UNIT A HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 782 NORTHWEST LE JEUNE ROAD #428 MIAMI, FL 33126			Mailing Address 782 NORTHWEST LE JEUNE ROAD #428 MIAMI, FL 33126		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0682563	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
PUIG, MAGALI L 782 NORTHWEST LE JEUNE ROAD #428 MIAMI, FL 33126			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD	NAME ANLLO, INGRID	<input type="checkbox"/> Delete			
STREET ADDRESS 3350 SW 129TH AVE					
CITY-ST-ZIP MIAMI, FL 33175					
TITLE SD	NAME PUIG, MAGALI L	<input type="checkbox"/> Delete			
STREET ADDRESS 782 NORTHWEST LE JEUNE ROAD #428					
CITY-ST-ZIP MIAMI, FL 33126					
TITLE TD	NAME MARTINEZ, LIZARDO	<input type="checkbox"/> Delete			
STREET ADDRESS 3705 SW 130 AVE					
CITY-ST-ZIP MIAMI, FL 33175					
TITLE V	NAME MONSERRAT, LEONARDO	<input type="checkbox"/> Delete			
STREET ADDRESS 3400 S.W. 128 AVENUE					
CITY-ST-ZIP MIAMI, FL 33175					
TITLE V	NAME GUERRERO, RAUL	<input type="checkbox"/> Delete			
STREET ADDRESS 3545 S.W. 129 AVENUE					
CITY-ST-ZIP MIAMI, FL 33175					
TITLE 	NAME 	<input type="checkbox"/> Delete			
STREET ADDRESS 					
CITY-ST-ZIP 					
TITLE 	NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
STREET ADDRESS 					
CITY-ST-ZIP 					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: 7/30/07.					
Daytime Phone #					