## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 22, 2005 8:00 am Secretary of State DOCUMENT # N96000004780 1. Entity Name 04-22-2005 90299 023 \*\*\*\*61.25 BIG FIVE HOMES HOMEOWNER'S ASSOCIATION, INC. Principal Place of Business Mailing Address %GALIANA MANAGEMENT 801 S.W. 3 AVE. #305 MIAMI FL 33130 %GALIANA MANAGEMENT 801 S.W. 3 AVE. #305 MIAMI FL 33130 30042211 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) Applied For 4. FEI Number City & State City & State 65-0461838 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STIEFFEL, JULIO Street Address (P.O. Box Number is Not Acceptable) 790 SW 92 PASSAGE **MIAMI FL 33174** 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) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Addition ☐ Delete STIEFFEL, JULIO NAME 790 SW 92 PASSAGE STREET ADDRESS STREET ADDRESS MIAMI FL 33174 CITY-ST-7IP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE CABRERA, ERNESTO NAME NAME 530 SW 92 PASSAGE STREET ADDRESS STREET ADDRESS MIAMI FL 33174 CITY-ST-ZIP CITY-ST-ZIP ST \_ Delete TITLE Change Addition FERNANDEZ, ERNEST NAME NAME 9272 SW GRAND CANAL DR STREET ADDRESS STREET ADDRESS MIAMI FL 33174 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition PIQUE, ROBERTO NAME NAME 451 S.W. 92 PASSAGE STREET ADDRESS STREET ADDRESS MIAMI FL 33174 CITY-ST-7IP CITY-ST-ZIP ☐ Addition Delete TITLE Change LOPEZ, ABRAHAM NAME NAME 590 S.W. 92 PASSAGE STREET ADDRESS STREET ADDRESS MIAMI FL 33174 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ERNEST FERNANDER

**FILED**