

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90189 038 ****61.25

DOCUMENT # N96000004780

1. Entity Name
BIG FIVE HOMES HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business

**9095 SW 87 AVE
STE 777
MIAMI FL 33176**

Mailing Address

**9095 SW 87 AVE
STE 777
MIAMI FL 33176**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0461838**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STIEFFEL, JULIO
790 SW 92 PASSAGE
MIAMI FL 33174**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$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 **D** Delete
NAME **STIEFFEL, JULIO**
STREET ADDRESS **790 SW 92 PASSAGE**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE **D.P.** Change Addition
NAME **Stieffel, Julio. Vice Pres.**
STREET ADDRESS **790 S.W. 92 Passage**
CITY-ST-ZIP **Miami Fl. 33174**

TITLE **T** Delete
NAME **HERRERA, MIGUEL**
STREET ADDRESS **510 SW 92 PASSAGE**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE **President** Change Addition
NAME **Miguel, Herrera**
STREET ADDRESS **510 S.W. 92 Passage**
CITY-ST-ZIP **Miami Fl. 33174**

TITLE **PD** Delete
NAME **KAISER, BEATRIZ L**
STREET ADDRESS **710 SW 92 PASSAGE**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** Delete
NAME **FERNANDEZ, ERNEST**
STREET ADDRESS **9272 SW GRAND CANAL DR**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** Delete
NAME **CABRERA, ERNESTO**
STREET ADDRESS **530 SW 92 PASSAGE**
CITY-ST-ZIP **MIAMI FL 33174**

TITLE **Treasurer** Change Addition
NAME **Cabrera Ernesto**
STREET ADDRESS **530 S.W. 92 Passage**
CITY-ST-ZIP **Miami - Fl. 33174**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE: *[Signature]* **REQUIRED**

3/7/03 305-854-2138

CR2E037 (10/02)