

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003978

FILED  
Apr 21, 2011  
Secretary of State

**Entity Name:** ROLLING HILLS PLANTATION HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

CENTURY MGMT SRVS., INC  
1495 N PRK DR  
FORT LAUDERDALE, FL 33326

**New Principal Place of Business:**

CENTURY MGMT SRVS., INC  
1495 N PARK DR  
FORT LAUDERDALE, FL 33326

**Current Mailing Address:**

CENTURY MGMT SRVS., INC  
1495 N PRK DR  
FORT LAUDERDALE, FL 33326

**New Mailing Address:**

CENTURY MGMT SRVS., INC  
1495 N PARK DR  
FORT LAUDERDALE, FL 33326

FEI Number: 65-0804076

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EISINGER BROWN AND FRANKEL  
PRESIDENTIAL CIRCLE # 265 S  
4000 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33021 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: MARTIN, DON  
Address: 1495 NORTH PARK DRIVE  
City-St-Zip: WESTON, FL 33326

Title: S  
Name: LANG, JUDY  
Address: 1495 NORTH PARK DRIVE  
City-St-Zip: WESTON, FL 33326

Title: D  
Name: JOEL, SPIEGELMAN  
Address: 1495 N PARK DRIVE  
City-St-Zip: WESTON, FL 33326

Title: TD  
Name: FISHEL, PETER  
Address: 1495 NORTH PARK DRIVE  
City-St-Zip: WESTON, FL 33326

Title: VP  
Name: BELL, DOUG  
Address: 1495 NORTH PARK DRIVE  
City-St-Zip: WESTON, FL 33326

Title: P  
Name: LICARI, JERRY  
Address: 1495 NORTH PARK DRIVE  
City-St-Zip: WESTON, FL 33326

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: JERRY LICARI

P

04/21/2011

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

\_\_\_\_\_  
Date