

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004722

FILED
Apr 27, 2006
Secretary of State

Entity Name: ALTON ROAD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5455 ALTON RD
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

4740 ALTON RD
MIAMI BEACH, FL 33140 US

Current Mailing Address:

P.O. BOX 402501
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 06-1637926 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTCHER, MARK E
5455 ALTON RD.
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

HOFFMAN-GUZMAN, CAROL
4740 ALTON ROAD
MIAMI BEACH, FL 33140 US

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: CAROL HOFFMAN-GUZMAN

04/27/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUTCHER, MARK E
Address: 5455 ALTON RD.
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VP () Delete
Name: OTERO, FRANK
Address: 5979 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: T () Delete
Name: LOPEZ, LIZETTE
Address: 5042 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: S () Delete
Name: DAVIS, LAURIE
Address: 5965 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: WOLFF, LOIS
Address: 4635 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: GOLDSTEIN, JERRY
Address: 3040 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOFFMAN-GUZMAN, CAROL
Address: 4740 ALTON RD.
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ROSENSTEIN, EMILY
Address: 4585 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33140

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LIZETTE LOPEZ

T

04/27/2006

Electronic Signature of Signing Officer or Director

Date