

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90033 035 ****61.25

DOCUMENT # N97000006787	
1. Entity Name BAHIA MIRAMAR HOMEOWNERS' ASSOCIATION, INC.	



Principal Place of Business 12323 SW 55TH STREET #1002 COOPER CITY, FL 33330 US	Mailing Address 12323 SW 55TH STREET #1002 COOPER CITY, FL 33330 US
---	---

44006266

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



01122004 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0880701	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	
LANDMARK MANAGEMENT 12323 SW 55 STREET COOPER CITY, FL 33330		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	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 _____

Filing Fee is \$61.25 Due by May 1, 2004	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 NAME STREET ADDRESS CITY-ST-ZIP	PD ROMERO, JUAN 12617 SW 53RD CT MIRAMAR, FL 33027 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD CRUZ, JUAN C 12495 SW 53RD ST MIRAMAR, FL 33027 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARVIN, LOTTI 12558 SW 53 CT MIRAMAR, L 33027 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARA THIELSEN 12500 SW 53 STREET MIRAMAR, FLORIDA 33027 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MANANZAN, LISA 5419 SW 126 TERRACE HOLLYWOOD, FL 33027 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SHARON BARON 12612 SW 54 COURT MIRAMAR, FLORIDA 33027 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MAURICE LAWRENCE 5365 SW 126 TERRACE MIRAMAR, FLORIDA 33027 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: _____ **1/22/2004** **(305) 829-1504**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #