2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006787

FILED Jan 19, 2009 Secretary of State

Entity Name: BAHIA MIRAMAR HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1941 NW 150TH AVE

PEMBROKE PINES, FL 33028 US

Current Mailing Address: New Mailing Address:

1941 NW 150TH AVE

PEMBROKE PINES, FL 33028 US

FEI Number: 65-0880701 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROUGH, CHADRON & LEVINE, P.A. GLOBAL COMMERCE CENTER 1900 NORTH COMMERCE PKWY WESTON, FL 33326 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VPD () Delete Title: VPTD (X) Change () Addition CRUZ, JUAN C Name: CRUZ, JUAN C

 Name:
 CRUZ, JUAN C
 Name:
 CRUZ, JUAN C

 Address:
 12495 SW 53RD ST.
 Address:
 12495 SW 53RD ST.

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

Title: D () Delete Title: SD (X) Change () Addition Name: GARVIN, LOTTI Name: GARVIN, LOTTI

 Name
 GARVIN, LOTTI
 Name
 GARVIN, LOTTI

 Address:
 12558 SW 53RD CT
 Address:
 12558 SW 53RD CT

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

Title: VPD () Delete Title: PD (X) Change () Addition

 Name:
 GARVIN, LOTTI
 Name:
 RAMESSAR, IAN

 Address:
 12558 SW 53RD CT
 Address:
 12489 SW 53 ST

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf (A) Change (A) Addition}$

 Name:
 ANDERSON, DEBORAH
 Name:
 WESLEY, KATHY

 Address:
 5353 SW 126 TERR
 Address:
 5332 SW 126 AVE

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify 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: PAM MCCRACKINE CAM 01/19/2009