

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003303

FILED
Jan 14, 2009
Secretary of State

Entity Name: MILLER SOUTH HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O M & E ASSOCIATES OF MIAMI INC
13055 SW 42 ST SUITE 203
MIAMI, FL 33175

New Principal Place of Business:

M & E ASSOCIATES OF MIAMI , INC
13055 SW 42 ST SUITE 203
MIAMI, FL 33175

Current Mailing Address:

C/O M & E ASSOCIATES OF MIAMI INC
13055 SW 42 ST SUITE 203
MIAMI, FL 33175

New Mailing Address:

M & E ASSOCIATES OF MIAMI , INC
13055 SW 42 ST SUITE 203
MIAMI, FL 33175

FEI Number: 65-1107851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SKRLD, INC
201 ALHAMBRA CIR #1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SKRLD, INC
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 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:

01/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FERNANDEZ, MANUEL
Address: 15813 SW 62 TERR
City-St-Zip: MIAMI, FL 33193

Title: VPT () Delete
Name: BARCENA, LORENZO
Address: 15813 SW 62 TERR
City-St-Zip: MIAMI, FL 33193

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FERNANDEZ, MANUEL
Address: 15813 SW 62 TERRACE
City-St-Zip: MIAMI, FL 33193

Title: STD (X) Change () Addition
Name: BARCENA, LORENZO
Address: 15813 SW 62 TERR
City-St-Zip: MIAMI, FL 33193

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: MANUEL FERNANDEZ

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date