2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007240

FILED Apr 06, 2009 Secretary of State

Entity Name: CATALINA LAKES HOMEOWNERS ASSOCIATION, INC.

Current Pr	rincipal Plac	ce of Business:	New Prin	New Principal Place of Business:		
C/O CAPITAL REALTY ADVISOR INC. 600 SANDTREE DR., #109 PALM BEACH GARDENS, FL 33403			600 SAND	C/O CAPITAL REALTY ADVISORS, INC. 600 SANDTREE DR., #109 PALM BEACH GARDENS, FL 33403		
Current Ma	ailing Addre	ess:	New Mail	New Mailing Address:		
C/O CAPITAL REALTY ADVISOR INC. 600 SANDTREE DR., #109 PALM BEACH GARDENS, FL 33403			600 SAND	C/O CAPITAL REALTY ADVISORS, INC. 600 SANDTREE DR., #109 PALM BEACH GARDENS, FL 33403		
FEI Number:	65-0967289	FEI Number Applied For ()	FEI Number Not App	plicable () Certificate of Status Desired ()		
Name and	Address of	Current Registered Agent:	Name and	d Address of New Registered Agent:		
C/O CAPIT 600 SAND WEST PAL	TREE DR., # _M BEACH, I named entity	FL 33403 US	C/O CAPI 600 SANE PALM BE.	MCDONALD ITAL REALTY ADVISORS, INC. DTREE DR., #109 ACH GARDENS, FL 33403 US its registered office or registered agent, or both,		
SIGNATUR	RE: DONNA	A MCDONALD		04/06/2009		
	Electro	onic Signature of Registered A	Agent	Date		
OFFICERS	S AND DIRE	CTORS:	ADDITIO	NS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	OREMLAND, 433 CAPISTR		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	KILTAN, SEA 455 CAPISTR		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition KILTAN, SEAN 455 CAPISTRANO DR PALM BEACH GARDENS, FL 33410		
Title: Name: Address: City-St-Zip:	DEMPSEY, E 444 CAPISTR		Title: Name: Address: City-St-Zip:	TD (X) Change () Addition DEMPSEY, ELLEN 444 CAPISTRANO DRIVE PALM BEACH GARDENS, FL 33410		
Title: Name: Address: City-St-Zip:	WEBBER, DO 312 SAUNAS		Title: Name: Address: City-St-Zip:	SD (X) Change () Addition WEBBER, DOUG 312 SALINAS DR PALM BEACH GARDENS, FL 33410		
Title: Name: Address: City-St-Zip:	CONNELL, KI 402 CAPISTR		Title: Name: Address: City-St-Zip:	() Change () Addition		

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: ELLEN DEMPSEY T 04/06/2009