

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006742

**FILED
Apr 28, 2014
Secretary of State
CC4058600795**

Entity Name: CATALINA ISLES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O EXCLUSIVE PROPERTY MANAGEMENT
2945 W. CYPRESS CREEK RD. SUITE 201
FT. LAUDERDALE, FL 33309

Current Mailing Address:

C/O EXCLUSIVE PROPERTY MANAGEMENT
2945 W. CYPRESS CREEK RD. SUITE 201
FT. LAUDERDALE, FL 33309 US

FEI Number: 20-1351198

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROUGH, CHADROW & LEVINE, P.A.
1900 N. 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: DAVID BROUGH

04/28/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name BETANCUR, ALEXANDER
Address 2945 W. CYPRESS CREEK RD.
SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

Title PRESIDENT
Name CHRUSCH, MIKE
Address 2945 W. CYPRESS CREEK RD.
SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

Title SECRETARY
Name SMITH, KEISHA
Address 2945 W. CYPRESS CREEK RD.
SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

Title TREASURER
Name BADARACCO, JONAH
Address 2945 W. CYPRESS CREEK RD.
SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33309

I hereby 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 all other like empowered.

SIGNATURE: MIKE CHRUSCH

PRESIDENT

04/28/2014

Electronic Signature of Signing Officer/Director Detail

Date