

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18548

Entity Name: DAWN HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**

% V.I.P. PROPERTY MANAGEMENT SPECIALISTS
2531 ARAGON BLVD
SUNRISE, FL 33322

Current Mailing Address:

% V.I.P. PROPERTY MANAGEMENT SPECIALISTS
2531 ARAGON BLVD
SUNRISE, FL 33322

FEI Number: 59-2793971**Certificate of Status Desired: No****Name and Address of Current Registered Agent:**

GELLER-SCHNAITMAN, TRACEY S
2531 ARAGON BLVD
SUNRISE, FL 33322 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**Officer/Director Detail :**

Title DIRECTOR, VP
Name GUILLAUME, CHARLES
Address 2531 ARAGON BLVD.
City-State-Zip: SUNRISE FL 33322

Title TREASURER, DIRECTOR
Name SCHUBERT, RYAN
Address 2531 ARAGON BLVD.
City-State-Zip: SUNRISE FL 33322

Title PRESIDENT, DIRECTOR
Name WARD, JOHN
Address 2531 ARAGON BLVD.
City-State-Zip: SUNRISE FL 33322

Title D, SECRETARY
Name BUTLER , SARAH J
Address 2531 ARAGON BLVD
City-State-Zip: SUNRISE FL 33322

Title DIRECTOR
Name GARCIA, WILFREDO
Address 2531 ARAGON BLVD.
City-State-Zip: SUNRISE FL 33322

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: JOHN WARD**PRESIDENT****04/27/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date