

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39504

Entity Name: ADAGIO AT THE HAMMOCKS HOMEOWNERS ASSOCIATION, INC.**FILED**
Feb 16, 2013
Secretary of State
CC0053850439**Current Principal Place of Business:**C/O MARATHON PROPERTIES
11502 SW 149 PATH
MIAMI, FL 33196**Current Mailing Address:**C/O MARATHON PROPERTIES
P.O. BOX 960636
MIAMI, FL 33296 US**FEI Number: 65-0275322****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ALBERT E. ACUNA, P.A.
782 NW 42ND AVE.
STE 343
MIAMI, FL 33126 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	P
Name	AMBRIZ, VICTOR
Address	11425 S.W. 149 CT
City-State-Zip:	MIAMI FL 33196

Title	VP
Name	PEDROSO, HERBERTO
Address	11434 SW 149 CT
City-State-Zip:	MIAMI FL 33196

Title	SC
Name	CAMINO, LUIS
Address	11482 SW 149 PL
City-State-Zip:	MIAMI FL 33196

Title	TR
Name	FIGUEROA, JOSE
Address	11541 SW 148 CT
City-State-Zip:	MIAMI FL 33196

Title	D
Name	PAIZ, JOSE
Address	14617 SW 113 LANE
City-State-Zip:	MIAMI FL 33186

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: LUIS CAMINO**SECRETARY****02/16/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date