

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 13, 2009  
Secretary of State**

DOCUMENT# 747364

Entity Name: LAKEVIEW GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

10250 SW 56TH ST STE C-102  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

10250 SW 56TH ST STE C-102  
MIAMI, FL 33165

**New Mailing Address:**

FEI Number: 59-2589579      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AMPREX PROPERTY MGMT  
10250 SW 56TH ST C-102  
MIAMI, FL 33165      US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GARCES, LIDIA  
Address: 7711 SW 56THST A-212  
City-St-Zip: MIAMI, FL 33155

Title: P ( ) Delete  
Name: ACEBO, ALEXIS  
Address: 5275 SW 77TH CT H-207  
City-St-Zip: MIAMI, FL 33155

Title: TD ( ) Delete  
Name: BAYON, MIGUEL  
Address: 5301 SW 77TH CT G-208  
City-St-Zip: MIAMI, FL 33155

Title: D (X) Delete  
Name: NUNEZ, CHARLES F  
Address: 5501 S.W. 77CT #104-C  
City-St-Zip: MIAMI, FL 33155

Title: VP (X) Delete  
Name: GAMBLE, JAY  
Address: 600 BILTMORE WAY #1019  
City-St-Zip: CORAL GABLES, FL 33134

Title: S ( ) Delete  
Name: ARIAS, LIURY  
Address: 5301 SW 77TH CT C-205  
City-St-Zip: MIAMI, FL 33155

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: MACHADO, ILEANA  
Address: 5275 SW 77TH CT H-109  
City-St-Zip: MIAMI, FL 33155

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARCIA IGLESIAS

P

03/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date