

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752866

FILED  
Sep 12, 2008  
Secretary of State

Entity Name: MISTY LAKE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4780 N STATE RD 7  
STE E 250  
FORT LAUDERDALE, FL 33319 US

**New Principal Place of Business:**

160 NW 176TH STREET  
STE 301  
MIAMI, FL 33169 US

**Current Mailing Address:**

4780 N STATE RD 7  
STE E 250  
FORT LAUDERDALE, FL 33319 US

**New Mailing Address:**

160 NW 176TH STREET  
STE301  
MIAMI, FL 33169 US

FEI Number: 65-0184763      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

STRALEY & OTTO, P.A.  
2699 STIRLING ROAD  
SUITE C-207  
FT. LAUDERDALE, FL 33312 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: VPD ( ) Delete  
Name: LEWIS, DERRICK  
Address: 460 NW 214TH STREET #203  
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete  
Name: MILLER, DAWN  
Address: 400 NW 214TH ST #102  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: MOSLEY, CARLA  
Address: 540 NW 214TH ST #104  
City-St-Zip: MIAMI, FL 33169

Title: P ( ) Delete  
Name: PIERRE, MAX  
Address: 600 W 214 ST 204  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: GUERLINE, COVIL  
Address: 510 214TH ST #203  
City-St-Zip: MIAMI, FL 33169

Title: D (X) Delete  
Name: GUERRIER, FLORENCE  
Address: 505 NW 214TH STREET #106  
City-St-Zip: MIAMI, FL 33169

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

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

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

Title: DT (X) Change ( ) Addition  
Name: STEPHENSON, MONIQUE  
Address: 420 NW 214TH ST #101  
City-St-Zip: MIAMI, FL 33169

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

Title: D (X) Change ( ) Addition  
Name: CLYDE, ANDERSON  
Address: 405 214TH ST #102  
City-St-Zip: MIAMI, FL 33169

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: MAX PIERRE

DP

09/12/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date