

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

**FILED  
Apr 29, 2009  
Secretary of State**

DOCUMENT# 767919

Entity Name: LAKE ARBOR VILLAGE HOMEOWNER'S ASSOCIATION UNIT SIX, INC.

**Current Principal Place of Business:**

PO BOX 171267  
HIALEAH, FL 33017

**New Principal Place of Business:**

18590 NW 67 AVENUE  
STE 200B  
HIALEAH, FL 33015

**Current Mailing Address:**

PO BOX 171267  
HIALEAH, FL 33017

**New Mailing Address:**

FEI Number: 59-2693715      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BERRIOS, SANDRA  
RELIABLE PROPERTY MANAGEMENT  
18590 NW 67 AVE. STE 200B  
HIALEAH, FL 33015 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: PD ( ) Delete  
Name: GLENDALE, LEONARD  
Address: 19450 NW. 51ST PLACE  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: ALVAREZ, NORAH  
Address: 19448 N.W. 51ST PLACE  
City-St-Zip: MIAMI, FL

Title: D (X) Delete  
Name: MARSHALL, MARVIN  
Address: 5053 NW 195 LANE  
City-St-Zip: MIAMI, FL

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

Title: PD (X) Change ( ) Addition  
Name: GLENDALE, L  
Address: 18590 NW 67 AVENUE, STE 200B  
City-St-Zip: HIALEAH, FL 33015

Title: TD (X) Change ( ) Addition  
Name: ALVAREZ, N  
Address: 18590 NW 67 AVENUE, STE 200B  
City-St-Zip: HIALEAH, FL 33015

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: L. GLENDALE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

04/29/2009

\_\_\_\_\_  
Date