## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000008225

FILED Jan 06, 2009 Secretary of State

Entity Name: VILLAS AT LAKEVIEW CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

5200 NW 31ST AVENUE FT. LAURDERDALE, FL 33309

**Current Mailing Address: New Mailing Address:** 

POB 9139 PO BOX 9139

POMPANO BEACH, FL 33075 POMPANO BEACH, FL 33075

FEI Number: 20-3384651 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RANDALL K. ROGER & ASSOCIATES, PA 621 NW 53RD ST STE 300 BOCA RATON, FL 33487 US

**OFFICERS AND DIRECTORS:** 

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:

Date

Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

**PRES PRES** () Delete AXERROD, JACK Name: Name:

NANCY, ALIA 5200 NW 31ST AVENUE Address: 5200 NW 31ST AVENUE Address: City-St-Zip: FT. LAURDERDALE, FL 33309 City-St-Zip: FT. LAURDERDALE, FL 33309

Title: () Delete Title: (X) Change ( ) Addition JORDON, LATHESHA HUDSON, DONNA Name: Name: Address:

5200 NW 31ST AVENUE Address: 5200 NW 31ST AVENUE City-St-Zip: FT. LAURDERDALE, FL 33309 City-St-Zip: FT. LAURDERDALE, FL 33309

Title: () Delete Title: (X) Change ( ) Addition ALIA, MICHAEL REBICH, LISA Name: Name:

Address: 5200 NW 31ST AVE Address: 5200 NW 31ST AVE City-St-Zip: FT LAUDERDALE, FL City-St-Zip: FT LAUDERDALE, FL

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: BURNS, ARTHUR Address: Address: 5200 NW 31ST AVE City-St-Zip: City-St-Zip: FT LAUDERDALE, FL 33309

Title: () Delete Title: ( ) Change (X) Addition

DAVILLA, RAFAEL Name: Name: 5200 NW 31 AVE Address: Address:

City-St-Zip: City-St-Zip: FT. LAUDERDALE, FL 33309

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: TED BROWN / PROPERTY MANAGER **PROP** 01/06/2009