

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 08, 2007
Secretary of State**

DOCUMENT# N06000000690

Entity Name: LORIDA COUNTRY ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2100 CORAL WAY #602
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

2100 CORAL WAY #602
MIAMI, FL 33145

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MARKOWITZ, ILAN
2100 CORAL WAY #602
MIAMI, FL 33145 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: SEGEV, URI
Address: 2100 CORAL WAY #602
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: MARKOWITZ, ILAN
Address: 2100 CORAL WAY #602
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: BENAMRAM, YORAM
Address: 2100 CORAL WAY #602
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: URI SEGEV

D

02/08/2007

Electronic Signature of Signing Officer or Director

_____ Date