

**2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Apr 07, 2008  
Secretary of State**

DOCUMENT# N12152

Entity Name: ELAN AT CALUSA CONDOMINIUM II ASSOCIATION, INC.

**Current Principal Place of Business:**

MIAMI MANAGEMENT  
14275 SW 142 AVE  
MIAMI, FL 33186

**New Principal Place of Business:**

LAKEVIEW MANAGEMENT, INC.  
13388 SW 128 STREET  
MIAMI, FL 33186

**Current Mailing Address:**

MIAMI MANAGEMENT  
14275 SW 142 AVE  
MIAMI, FL 33186

**New Mailing Address:**

LAKEVIEW MANAGEMENT  
13388 SW 128 STREET  
MIAMI, FL 33186 US

FEI Number: 59-2774609      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:**

TRIAIY, CARLOS A  
3750 NW 87TH AVE, # 100  
DORAL, FL 33178 US

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

MITZENMACHER, MARGIE CAM  
13388 SW 128 STREET  
MIAMI, FL 33186 US

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: MARGIE MITZENMACHER

04/07/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD      (X) Delete  
Name: TAYLOR, ANN MARIE  
Address: 12962 SW 88 LANE  
City-St-Zip: MIAMI, FL 33186

Title: D      (X) Delete  
Name: CARR, CATHIO  
Address: 14275 SW 142 AVE  
City-St-Zip: MIAMI, FL 33186

Title: PD      ( ) Delete  
Name: LOPEZ, LILLIAN  
Address: 12964 SW 88 LN  
City-St-Zip: MIAMI, FL 33186

**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 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: LILLIAN LOPEZ

PD

04/07/2008

Electronic Signature of Signing Officer or Director

Date