


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N21327 1. Entity Name LE CLUB AT KENDALE LAKES CONDOMINIUM ASSOCIATION INC.	
--	---

Principal Place of Business C/O ATLAS 8600 N.W. 17TH ST., #145 MIAMI, FL 33126 US	Mailing Address C/O ATLAS 8600 N.W. 17TH ST., #145 MIAMI, FL 33126 US
---	---



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country
Zip	Country

01212008 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0198117	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**EISINGER, BROWN, LEWIS, & FRANKEL, P.A.
4000 HOLLYWOOD BOULEVARD
PRESIDENTIAL CIRCLE, SUITE 265S
HOLLYWOOD, FL 33021**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE	VP/D <input type="checkbox"/> Delete DIAZ, WILLIAM 6520 SW 138 COURT APT. 603 MIAMI, FL 33183
TITLE	P/D <input type="checkbox"/> Delete AVILES, DANIEL 6560 S W 138 CT #801 MIAMI, FL 33183
TITLE	S/D <input type="checkbox"/> Delete VELASQUEZ, BARBARA 6420 SW 138 CT #106 MIAMI, FL 33183
TITLE	T/D <input type="checkbox"/> Delete CARRILLO, ORIETTA 6500 SW 138 CT., #701 MIAMI, FL 33183
TITLE	<input type="checkbox"/> Delete
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000000837145 03/04/08-80045-003 61.25
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **2/18/08** **305-215-2801**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #