

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001313

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: LAKE POINTE CONDOMINIUM ASSOCIATION OF MARINA LAKE, INC.

**Current Principal Place of Business:**

4970 SW 72ND AVE  
MIAMI, FL 33155 US

**New Principal Place of Business:**

**Current Mailing Address:**

7250 SW 39 TERRACE  
MIAMI, FL 33155 US

**New Mailing Address:**

FEI Number: 65-0571757

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCOTT WESTON, JOHN  
7250 SW 39 TERRACE  
MIAMI, FL 33155 US

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

WESTON, JOHN S  
7250 SW 39 TERRACE  
MIAMI, FL 33155 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: JOHN S WESTON

04/02/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: ABBASS, KHONSANY  
Address: 4970 SW 72 AVE STE 100  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: EDUARDO, GOUDIE  
Address: 4970 SW 72 AVE 102  
City-St-Zip: MIAMI, FL 33157

Title: D ( ) Delete  
Name: GIBELLINI, DANIELA  
Address: 4970 SW 72 AVE STE 103  
City-St-Zip: MIAMI, FL 33155

Title: VD ( ) Delete  
Name: QUEVEDO, RAFAEL  
Address: 4970 SW 72 AVE STE 109  
City-St-Zip: MIAMI, FL 33155

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

Title: PTD (X) Change ( ) Addition  
Name: KHONSARY, ABASS  
Address: 4970 SW 72 AVE STE 100  
City-St-Zip: MIAMI, FL 33155

Title: D (X) Change ( ) Addition  
Name: GOUDIE, EDUARDO  
Address: 4970 SW 72 AVE 102  
City-St-Zip: MIAMI, FL 33157

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: JOHN S WESTON

RA

04/02/2009

Electronic Signature of Signing Officer or Director

Date