

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763976

FILED  
Mar 25, 2005  
Secretary of State

**Entity Name:** GARDEN LAKE TOWERS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1101 SW 122 AVENUE  
#417 OFFICE  
MIAMI, FL 33184 US

**New Principal Place of Business:**

**Current Mailing Address:**

1101 SW 122 AVENUE  
#417 OFFICE  
MIAMI, FL 33184 US

**New Mailing Address:**

1101 SW 122 AVENUE  
#417 CONDO OFFICE  
MIAMI, FL 33184 US

**FEI Number:** 59-2335769

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARRILLO, SUSANA  
1101 SW 122 AVENUE  
#417 OFFICE  
MIAMI, FL 33184 US

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

CARRILLO, SUSANA  
1101 SW 122 AVENUE  
#417 CONDO OFFICE  
MIAMI, FL 33184 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:

03/25/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LEJARDI, LIONEL  
Address: 1101 SW 122 AVE, #417 OFFICE  
City-St-Zip: MIAMI, FL 33184 US

Title: TD ( ) Delete  
Name: BERERQUER, SONIA  
Address: 1101 SW 122 AVE, #417 OFFICE  
City-St-Zip: MIAMI, FL 33184 US

Title: SD ( ) Delete  
Name: CARRILLO, SUSANA  
Address: 13000 S.W. 133 CT.  
City-St-Zip: MIAMI, FL 33184 US

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

Title: PD (X) Change ( ) Addition  
Name: LEJARDI, LIONEL  
Address: 1101 SW 122 AVE, #417 CONDO OFFICE  
City-St-Zip: MIAMI, FL 33184 US

Title: TD (X) Change ( ) Addition  
Name: BERERQUER, SONIA  
Address: 1101 SW 122 AVE, #417 CONDO OFFICE  
City-St-Zip: MIAMI, FL 33184 US

Title: SD (X) Change ( ) Addition  
Name: CARRILLO, SUSANA  
Address: 1101 SW 122 AVE., #417 CONDO OFFICE  
City-St-Zip: MIAMI, FL 33184 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUSANA CARRILLO

SD

03/25/2005

Electronic Signature of Signing Officer or Director

Date