2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED DOCUMENT # N95000002564 2007 OCT 22 AM 7: 29 LWG CONDOMINIUM ASSOCIATION, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1250 LINCOLN RD. 2950 N. 28TH TERRACE MIAMI BCH, FL 33139 HOLLYWOOD, FL 33020 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 09112007 Chg-NP CR2E037 (12/06) Applied For 4. FEI Number 65-0589672 City & State City & State Not Applicable Country \$8.75 Additional Zip Country 5...Certificate of Status Desired. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SKRLD, INC. Street Address (P.O. Box Number is Not Acceptable) **?01 ALHAMBRA CIRCLE SUITE 1102** CORAL GABLES, FL 33134 City 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, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make check payable to Amended AR is \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PDT Delete TITLE Addition TITLE ☐ Change Ricardo De Paramo NAME KERN, TIMOTHY P 1250 LINCOLN RD 507 STREET ADDRESS STREET ADDRESS 1250 Linuar Rd CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-ZIP Miami Beach FL 33139 VPD __ Change TITLE ☐ Delete HILE Addition JOHN, APPLEBEE NAME NAME 10/26/07--01057--011 **81.25 1349 NE MIAMI CT #302 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP -MIAMI, FL 33132 CITY-ST-71P TITLE ☐ Delete TITLE ☐ Change ☐ Addition ALVAREZ, ROBERTO NAME 1250 LINCOLN RD #402 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition COLLINS, BARRY NAME NAME STREET ADDRESS 1749 NE MIAMI CT #302 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE ROMAN, GEORGE NAME STREET ADDRESS 1250 LINCOLN RD 201 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH, FL 33139 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-71P CITY - ST - ZIP 12. I hereby cartify 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 attachmer ed SIGNATURE: SIGNATURE AND TYPED OF IAME OF SIGNING OFFICER OR DIRECTOR

12/24/01