

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005019

FILED
Jan 28, 2009
Secretary of State

Entity Name: LEJEUNE PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

215 SW 42ND AVE
1ST FLOOR
CORAL GABLES, FL 33134

New Principal Place of Business:

C/O GUARANTEE MANAGEMENT SERVICES
6925 N.W. 42ND STREET
MIAMI, FL 33166

Current Mailing Address:

C/O GUARANTEE MANAGEMENT
6925 NW 42ND STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number: 56-2529322 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRLD, INC
201 ALHAMBRA CIRCLE
SUITE 1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OREA, DIANA
Address: 215 SW 42 AVE # 811
City-St-Zip: MIAMI, FL 33134

Title: VPD () Delete
Name: PEKEIRA, JORGE
Address: 215 SW 42 AVE # 809
City-St-Zip: MIAMI, FL 33134

Title: TD () Delete
Name: HENAO, GUSTAVO
Address: 215 SW 42 AVE
City-St-Zip: MIAMI, FL 33134

Title: SEC () Delete
Name: COLUNGA, RAFAEL
Address: 215 SW 42 AVE # 511
City-St-Zip: MIAMI, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OREA, DIANA
Address: 215 S.W. 42ND AVENUE UNIT #811
City-St-Zip: MIAMI, FL 33134

Title: VPD (X) Change () Addition
Name: CARMONA, NATALY
Address: 215 S.W. 42ND AVENUE UNIT #910
City-St-Zip: MIAMI, FL 33134

Title: SD (X) Change () Addition
Name: DURAND, SERGIO
Address: 215 S.W. 42ND AVENUE UNIT #911
City-St-Zip: MIAMI, FL 33134

Title: TD (X) Change () Addition
Name: SUARES, JESSE
Address: 215 S.W. 42ND AVENUE UNIT # 410
City-St-Zip: MIAMI, FL 33134

Title: D () Change (X) Addition
Name: HIGDON, JEFF
Address: 215 S.W. 42ND AVENUE # PH-01
City-St-Zip: MIAMI, FL 33134

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: DIANA OREA

PD

01/28/2009

Electronic Signature of Signing Officer or Director

Date