

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 721054

**FILED**  
**Feb 22, 2024**  
**Secretary of State**  
**0953444773CC**

**Entity Name:** MIAMI LAKES LAKE MARTHA HOMEOWNERS ASSOCIATION  
NO.2, INC.

**Current Principal Place of Business:**

LAKE MARTHA HOMEOWNERS ASSOC  
PO BOX 4355  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

HIALEAH LAKES STATION  
PO BOX 4355  
MIAMI LAKES, FL 33014

**FEI Number: 59-2708924**

**Certificate of Status Desired: No**

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

BROUGH, CHADROW & LEVINE, P.A.  
2149 NORTH COMMERCE PARKWAY  
WESTON, FL 33326 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name BORMAN, LARRY  
Address 7214 JACARANDA LANE  
City-State-Zip: MIAMI LAKES FL 33014

Title VP  
Name NEWLAND, JEAN  
Address 7286 JACARANDA LN  
City-State-Zip: MIAMI LAKES FL 33014

Title S  
Name DIAZ, MARLENE  
Address 7272 JACARANDA LANE  
City-State-Zip: MIAMI LAKES FL 33014

Title T  
Name BARON, JOHN  
Address 6870 MIAMI LAKES DR  
City-State-Zip: MIAMI LAKES FL 33014

Title D  
Name OWEN, JOAN  
Address 7266 JACARANDA LN  
City-State-Zip: MIAMI LAKES FL 33014

*I hereby 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 all other like empowered.*

**SIGNATURE: LARRY BORMAN**

**PRESIDENT**

**02/22/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date