## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 746877** 

Entity Name: LES CHALETS HOMEOWNERS ASSOCIATION, INC.

**FILED** Mar 05, 2018 **Secretary of State** CC3069611444

## **Current Principal Place of Business:**

1500 NW 89 COURT SUITE 202 DORAL, FL 33172

## **Current Mailing Address:**

1500 NW 89 COURT SUITE 202 DORAL, FL 33172 US

FEI Number: 59-2266500 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

EISINGER, BROWN, LEWIS & FRANKEL, PA 4000 HOLLYWOOD BLVD SUITE 265 SOUTH HOLLYWOOD, FL 33019 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:

Name

City-State-Zip:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **PRESIDENT** 

Name PANDO, CLARA Name NAYOR, EMELY E. 1500 NW 89 COURT 2024 SW 106 COURT Address Address

SUITE 202 City-State-Zip: MIAMI FL 33165

City-State-Zip: **DORAL FL 33172** 

Title **SECRETARY** Title VΡ FERRAN, RAMON

Name GAUNTLETT, JUAN A

1500 NW 89 COURT Address 1500 NW 89 COURT Address SUITE 202

SUITE 202

DORAL FL 33172 City-State-Zip: DORAL FL 33172

Title **DIRECTOR** Title DIRECTOR

FRADE, LISANDRA Name ALVAREZ IGLESIAS, ALICIA Name

1500 NW 89 COURT Address

1500 NW 89 COURT Address SUITE 202

SUITE 202 **DORAL FL 33172** 

City-State-Zip: City-State-Zip: DORAL FL 33172

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.

03/05/2018 SIGNATURE: EMELY E. NAYOR **PRESIDENT** 

Date