

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N20849

Entity Name: LE JARDIN COMMUNITY CENTER, INC.

Current Principal Place of Business:

311 NE 8TH STREET
SUITE 203
HOMESTEAD, FL 33030

Current Mailing Address:

311 NE 8TH STREET
SUITE 203
HOMESTEAD, FL 33030 US

FEI Number: 59-2810036

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ, JUAN E
4000 PONCE DE LEON BLVD, STE 470
CORAL GABLES, FL 33146 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 VICE CHAIR
Name HALL, DAMARIS
Address 10411 SW 164 STREET
City-State-Zip: MIAMI FL 33157

Title CHIEF FINANCIAL OFFICER/CHIEF
OPERATIONS OFFICER
Name MARTINEZ, AUDELIA
Address 311 NE 8TH STREET
SUITE 203
City-State-Zip: HOMESTEAD FL 33030

Title CHAIR
Name OLIVERA, MARIA-ISABEL
Address 220 ALHAMBRA CIRCLE
City-State-Zip: CORAL GABLES FL 33134

Title BOARD MEMBER
Name LYNCH, JACQUELINE
Address 4286 FOXTAIL LANE
City-State-Zip: WESTON FL 33331

Title EXECUTIVE DIRECTOR
Name BERRONES, EDUARDO
Address 311 NE 8TH STREET
SUITE 203
City-State-Zip: HOMESTEAD FL 33030

Title BOARD MEMBER
Name GERARDIN, KARIN
Address 211 N. KROME AVENUE
City-State-Zip: HOMESTEAD FL 33030

Title BOARD MEMBER
Name MOORE, CHRISTINE
Address 9840 SW 72 STREET
City-State-Zip: MIAMI FL 33173

Title BOARD MEMBER
Name GOLDIN, DEANA
Address 14550 SW 84TH COURT
City-State-Zip: PALMETTO BAY FL 33158

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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: EDUARDO BERRONES

EXECUTIVE DIRECTOR

02/07/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	BOARD MEMBER	Title	TREASURER
Name	USQUELIS, PAOLA	Name	LYLE, CINDY
Address	8925 SW 148TH STREET SUITE 200	Address	29725 SW 166TH COURT
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	HOMESTEAD FL 33033