

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32407

FILED
Apr 30, 2015
Secretary of State
CC1861805112

Entity Name: MIAMI LAKES-LAKE CAROL HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD SUITE 33
MIAMI LAKES, FL 33016

Current Mailing Address:

C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD SUITE 33
MIAMI LAKES, FL 33016 US

FEI Number: 65-0159373

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AVCHEN, BARNEY BJD. P.A
1840 WEST 49TH STREET
226 PALM SPRINGS CENTER
HIALEAH, FL 33012 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 AMARO, RENARD
Address C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD
SUITE 33
City-State-Zip: MIAMI LAKES FL 33016

Title VP
Name DAUBERT, TIMOTHY
Address C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD
SUITE 33
City-State-Zip: MIAMI LAKES FL 33016

Title S
Name PHAGAN, SANDRA
Address C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD
SUITE 33
City-State-Zip: MIAMI LAKES FL 33016

Title T
Name MORALES, ROBERT
Address C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD
SUITE 33
City-State-Zip: MIAMI LAKES FL 33016

Title D
Name FARRES, NANCY
Address C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD
SUITE 33
City-State-Zip: MIAMI LAKES FL 33016

Title D
Name AGRENOT, LOREN
Address C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD
SUITE 33
City-State-Zip: MIAMI LAKES FL 33016

Title DIRECTOR
Name ROWELL, DON
Address C/O THE CAPIN GROUP
14160 PALMETTO FRONTAGE ROAD
SUITE 33
City-State-Zip: MIAMI LAKES FL 33016

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: RENARD AMARO

PRESIDENT

04/30/2015

