

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32407

**FILED**  
**Apr 28, 2017**  
**Secretary of State**  
**CC5566818981**

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

**Current Principal Place of Business:**

C/O THE CAPIN GROUP  
7787 NW 146TH STREET  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

C/O THE CAPIN GROUP  
7787 NW 146TH STREET  
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  
7787 NW 146TH STREET  
City-State-Zip: MIAMI LAKES FL 33016

Title VP  
Name ROWELL, DON  
Address C/O THE CAPIN GROUP  
7787 NW 146 STREET  
City-State-Zip: MIAMI LAKES FL 33016

Title T  
Name MORALES, ROBERT  
Address C/O THE CAPIN GROUP  
7787 NW 146TH STREET  
City-State-Zip: MIAMI LAKES FL 33016

Title D  
Name FARRES, NANCY  
Address C/O THE CAPIN GROUP  
7787 NW 146TH STREET  
City-State-Zip: MIAMI LAKES FL 33016

Title SECRETARY  
Name AGRENOT, LOREN  
Address C/O THE CAPIN GROUP  
7787 NW 146TH STREET  
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**

**04/28/2017**

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

\_\_\_\_\_  
Date