# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 08, 2007**
**Secretary of State**

DOCUMENT# 267582

**Entity Name:** RO-LEN LAKE GARDENS D CORPORATION

**Current Principal Place of Business:**

714 S.W. 11TH AVENUE
HALLANDALE, FL 33009

**New Principal Place of Business:**

**Current Mailing Address:**

714 S.W. 11TH AVENUE
HALLANDALE, FL 33009

**New Mailing Address:**

**FEI Number: 59-0966885** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

POWERS, ROBERT
920 SW 11 AVE
D-19
HALLANDALE, FL 33009 US

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

POWERS, ROBERT RA
920 SW 11 AVE
D-19
HALLANDALE, FL 33009 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: ROBERT POWERS 05/08/2007
Electronic Signature of Registered Agent Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete
Name: POWERS, ROBERT D
Address: 920 SW 11 AVE., D-19
City-St-Zip: HALLANDALE, FL 33009

Title: STD ( ) Delete
Name: ROBITAILLE, JOCELYNE
Address: 920 SW 11TH AVE
City-St-Zip: HALLANDALE, FL 33009

Title: VP/D ( ) Delete
Name: ST. GERMAIN, DENIS
Address: 920 SW 11 AVE D-1
City-St-Zip: HALLANDALE, FL 33009

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: POWERS, ROBERT P
Address: 920 SW 11 AVE APT# D-19
City-St-Zip: HALLANDALE, FL 33009

Title: ST (X) Change ( ) Addition
Name: ROBITAILLE, JOCELYNE ST
Address: 920 SW 11TH AVE APT# D-11
City-St-Zip: HALLANDALE, FL 33009

Title: VP (X) Change ( ) Addition
Name: ST. GERMAIN, DENIS VP
Address: 920 SW 11 AVE APT# D-1
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Change (X) Addition
Name: BEAULIEU, CLAUDE D
Address: 920 SW 11TH AVENUE APT# D-4
City-St-Zip: HALLANDALE, FL 33009

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT POWERS P 05/08/2007
Electronic Signature of Signing Officer or Director Date