

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719043

FILED
Mar 17, 2010
Secretary of State

Entity Name: AZURE LAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

AZURE LAKE
875 NE 195 STREET
MIAMI, FL 33179

New Principal Place of Business:

AZURE LAKE CONDOMINIUM ASSOCIATION, INC.
875 NE 195 STREET
MIAMI, FL 33179

Current Mailing Address:

AZURE LAKE
875 NE 195 STREET
MIAMI, FL 33179

New Mailing Address:

AZURE LAKE CONDOMINIUM ASSOCIATION, INC.
875 NE 195 STREET
MIAMI, FL 33179

FEI Number: 59-1292292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDALL K ROGER & ASSOCIATES P.A.
621 NW 53 STREET, SUITE 300
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P/T
Name: MULLGRAV, SUSAN
Address: 879 NE 195 STREET #227
City-St-Zip: MIAMI, FL 33179

Title: VP
Name: FINEBERG, JACK
Address: 873 NE 195 STREET #109
City-St-Zip: MIAMI, FL 33179

Title: T
Name: TRAVERS, SUSAN
Address: 873 NE 195 STREET #202
City-St-Zip: MIAMI, FL 33179

Title: S
Name: JOHNSON, PHYLLIS
Address: 875 NE 195 STREET #411
City-St-Zip: MIAMI, FL 33179

Title: D
Name: IDELS, ESTHER
Address: 877 NE 195 STREET #221
City-St-Zip: MIAMI, FL 33179

Title: D
Name: ALCINDOR, PIERRE
Address: 873 NE 195 STREET #401
City-St-Zip: MIAMI, FL 33179

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: SUSAN MULLGRAV

P/T

03/17/2010

Electronic Signature of Signing Officer or Director

Date