

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 03, 2002 8:00 am**  
**Secretary of State**

06-03-2002 91201 022 \*\*\*\*61.25

DOCUMENT # 725252

1. Entity Name

Naranja Lakes Condominium No. Five, Inc

**DO NOT WRITE IN THIS SPACE**

B0124228

2. Principal Place of Business

14840 Naranja Lks Blvd.

Suite, Apt. #, etc.

3. Mailing Address

14840 Naranja Lks Blvd.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Homestead, FL

City & State

Homestead, FL

4. FEI Number

59-1873201

Applied For

Not Applicable

Zip

33032

Country

US

Zip

33032

Country

US

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

De la Torre, Helio

Street Address (P.O. Box Number is Not Acceptable)

201 Alhambra Circle Ste #1102

City Coral Gables

FL

Zip Code

33155

**DO NOT WRITE  
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25**  
**Initial or Amended UBR**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VP	TITLE	
NAME	Ryan, Elizabeth	NAME	
STREET ADDRESS	14840 Naranja Lks Blvd. #1J	STREET ADDRESS	
CITY-ST-ZIP	Homestead, FL 33032	CITY-ST-ZIP	
TITLE	TD	TITLE	
NAME	Davis, Franklin	NAME	
STREET ADDRESS	14830 Naranja Lks Blvd. #3F	STREET ADDRESS	
CITY-ST-ZIP	Homestead, FL 33032	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Loyd Mason, Oneida	NAME	
STREET ADDRESS	14820 Naranja Lks Blvd. #3H	STREET ADDRESS	
CITY-ST-ZIP	Homestead, FL 33032	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Fairfield, Roy	NAME	
STREET ADDRESS	14820 Naranja Lks Blvd. #4A	STREET ADDRESS	
CITY-ST-ZIP	Homestead, FL 33032	CITY-ST-ZIP	
TITLE	P	TITLE	
NAME	Anthony Leonard S.	NAME	
STREET ADDRESS	14820 Naranja Lks Blvd. #PH	STREET ADDRESS	
CITY-ST-ZIP	Homestead, FL 33032	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	Roster, Bryant	NAME	
STREET ADDRESS	14840 Naranja Lks Blvd #4K	STREET ADDRESS	
CITY-ST-ZIP	Homestead, FL 33032	CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE

*Edward S. Anthony*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/02

Date

(305) 245-7011

Daytime Phone #

CR2E037B (12/01)