2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740893

FILED Sep 07, 2006 Secretary of State

Entity Name: LE JEUNE GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2500 NW 97 AVE #200 2200 NW 102ND AVE

MIAMI, FL 33172 SUITE 5 DORAL, FL 33172

Current Mailing Address: New Mailing Address:

2500 NW 97 AVE #200 2200 NW 102ND AVE

MIAMI, FL 33172 SUITE 5

DORAL. FL 33172 US

FEI Number: 65-0127240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SPM GROUP, INC

SPM GROUP, INC 2500 NW 97 ÁVE SUITE 200 2200 NW 102ND AVENUE MIAMI, FL 33172 SUITE 5

DORAL, FL 33172 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: 09/07/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete Name: Name:

MENZIES-DELMAS, MARY MRS MCDOWELL, SANDRA MS 3966 NW 181 LANE Address: 18240 NW 41 PLACE Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI GARDENS, FL 33055

Title: PD Title: (X) Change () Addition () Delete MCDOWELL, SANDRA MS Name: Name: MENZIES-DELMAS, MARY MRS

Address: 18240 NW 41 PL Address: 3966 NW 181 LANE City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI GARDENS, FL 33055

Title: () Delete Title: (X) Change () Addition WILLIAMS, CASSANDRA MS Name: WILLIAMS, CASSANDRA MS Name:

4050 NW 181 LANE 4050 NW 181 LANE Address: Address: City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI GARDENS, FL 33055

Title: SD () Delete Title: SD (X) Change () Addition

BURCH-LAWSON, SAMANTHA MRS Name: Name: WRIGHT, TEDDY MR 18187 NW 41 CT 18010 NW 39TH CT Address: Address:

City-St-Zip: MIAMI, FL 33055 City-St-Zip: MIAMI GARDENS, FL 33055

Title: () Delete Title: () Change () Addition

JOHNSON, ROY MR Name: Name: 4132 NW 181 LANE Address: Address: MIAMI, FL 33055 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA MCDOWELL PD 09/07/2006