

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 740893

FILED
Nov 09, 2007
Secretary of State

Entity Name: LE JEUNE GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2200 NW 102ND AVE
SUITE 5
DORAL, FL 33172 US

New Principal Place of Business:

18240 NW 41 PLACE
MIAMI GARDENS, FL 33055 US

Current Mailing Address:

2200 NW 102ND AVE
SUITE 5
DORAL, FL 33172 US

New Mailing Address:

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:

SPM GROUP, INC
2200 NW 102ND AVENUE
SUITE 5
DORAL, FL 33172 US

Name and Address of New Registered Agent:

CARLA, JONES ESQ
1999 SW 27TH AVENUE
MIAMI, FL 33145 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: CARLA JONES, ESQ

11/09/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCDOWELL, SANDRA MS
Address: 18240 NW 41 PLACE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: VD () Delete
Name: MENZIES-DELMAS, MARY MRS
Address: 3966 NW 181 LANE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: T () Delete
Name: WILLIAMS, CASSANDRA MS
Address: 4050 NW 181 LANE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: SD () Delete
Name: WRIGHT, TEDDY MR
Address: 18010 NW 39TH CT
City-St-Zip: MIAMI GARDENS, FL 33055

Title: D () Delete
Name: JOHNSON, ROY MR
Address: 4132 NW 181 LANE
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: JONES, JOANN MS
Address: 18236 NW 41 PLACE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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

11/09/2007

Electronic Signature of Signing Officer or Director

Date