

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740893

FILED
May 01, 2012
Secretary of State

Entity Name: LE JEUNE GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4050 NW 181 LANE
MIAMI GARDENS, FL 33055 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 171638
HIALEAH, FL 33017 US

New Mailing Address:

FEI Number: 65-0127240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLA, JONES ESQ
1999 SW 27TH AVENUE
MIAMI, FL 33145 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: T/D
Name: WILLIAMS, CASSANDRA MS
Address: 4050 NW 181 LANE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: VP/D
Name: STOKES, SYLVIA MS
Address: 18003 NW 41 PLACE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: P/D
Name: AMBROSE, MARIO MR
Address: 17948 NW 40 CT
City-St-Zip: MIAMI GARDENS, FL 33055

Title: S/D
Name: JONES, JOANN
Address: 18236 NW 41 PLACE
City-St-Zip: MIAMI, FL 33055

Title: VP/D
Name: CELHOMME, JEAN FRANCOIS
Address: 17938 NW 40 COURT
City-St-Zip: MIAMI, FL 33055

Title: D
Name: COOPER, PETER
Address: 17951 NW 40 COURT
City-St-Zip: MIAMI, FL 33055

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: CASSANDRA WILLIAMS

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05/01/2012

Electronic Signature of Signing Officer or Director

Date