2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#752124

FILED May 08, 2005 Secretary of State

Entity Name: MIAMI LAKES LOCH ISLE HOMEOWNERS' ASSOCIATION, INC.

Junioni	Principal Place of Business:	New Principal Place of Business:
	CHISLE DR. EAST KES, FL 33014 US	
Current M	Mailing Address:	New Mailing Address:
P.O. BOX MIAMI LAP	4527 KES, FL 33014 US	
n accordan	r: 59-2002678 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation did d Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired () not receive the prior notice. Name and Address of New Registered Agent:
FIGUERO 308 ALHA CORAL G	PA,MANNY C.P.A. MBRA CIRCLE ABLES, FL 33134 US	
	e named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATU	RE:	
	Electronic Signature of Registered A	gent Date
		9
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Γitle: √ame: √ddress:	S AND DIRECTORS: DP () Delete OLIVER, DAVE 15314 LOCH ISLE DR E MIAMI LAKES, FL 33014	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	DP () Delete OLIVER, DAVE 15314 LOCH ISLE DR E	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:
DFFICER. Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Name: Address: Dity-St-Zip:	DP () Delete OLIVER, DAVE 15314 LOCH ISLE DR E MIAMI LAKES, FL 33014 D () Delete HOWARD, WATSON 7031 LOCH ISLE DR. S.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Name: Name: Name: Name:	DP () Delete OLIVER, DAVE 15314 LOCH ISLE DR E MIAMI LAKES, FL 33014 D () Delete HOWARD, WATSON 7031 LOCH ISLE DR. S. MIAMI LAKES, FL 33014 T () Delete VANDENBERG, JOHN 7002 LOCH ISLE DR N	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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN VANDENBERG T 05/08/2005