

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758085

FILED  
Feb 11, 2011  
Secretary of State

**Entity Name:** LAKESIDE XI CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

15665 SW 73 CIR TERR  
MIAMI, FL 33193 US

**New Principal Place of Business:**

**Current Mailing Address:**

15665 SW 73 CIR TERR  
MIAMI, FL 33193 US

**New Mailing Address:**

FEI Number: 59-2238564      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CHAVEZ, FRANK  
15665 SW 73 CIR TERR.  
MIAMI, FL 33193 US

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

ANTLE, SORAYA  
15665 SW 73 CIR TERR.  
MIAMI, FL 33193 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: SORAYA ANTLE

02/11/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ANTLE, SORAYA  
Address: 15665 SW 73 CIR TERR  
City-St-Zip: MIAMI, FL 33193 US

Title: SD  
Name: LONG, REINHILDE  
Address: 15665 SW 73 CIR TERR  
City-St-Zip: MIAMI, FL 33193 US

Title: VPTD  
Name: MAHAFFEY, SHEILA A  
Address: 15665 SW 73 CIR TERR  
City-St-Zip: MIAMI, FL 33193 US

Title: D  
Name: CHAVEZ, ORLANDO  
Address: 15665 SW 73 CIR TERR  
City-St-Zip: MIAMI, FL 33193 US

Title: D  
Name: CHAVEZ, FRANK O  
Address: 15665 SW 73 CIR TERR  
City-St-Zip: MIAMI, FL 33193 US

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: SORAYA ANTLE

PRES

02/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date