# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 27, 2007**
**Secretary of State**

DOCUMENT# 758114

**Entity Name:** 200 LESLIE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

200 LESLIE DR
LOWER LOBBY
HALLANDALE, FL 33009 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 LESLIE DR.
AH: MANAGEMENT
HALLANDALE, FL 33009

**New Mailing Address:**

200 LESLIE DR.
ATTN: MANAGEMENT OFC
HALLANDALE, FL 33009

**FEI Number: 59-2134818** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

OSBORN, JARRETT
200 LESLIE DRIVE
HALLANDALE, FL 33009 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: PD ( ) Delete
Name: KORNHABEN, JACQUELYN
Address: 200 LESLIE DR.
City-St-Zip: HALLANDALE, FL 33009

Title: TD ( ) Delete
Name: OSBORN, JARRETT
Address: 200 LESLIE DR.
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete
Name: ACCURSO, SAM
Address: 200 LESLIE DR.
City-St-Zip: HALLANDALE, FL 33009

Title: SD ( ) Delete
Name: PEDRA, WANDA
Address: 200 LESLIE DR.
City-St-Zip: HALLANDALE, FL 33009

**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: PIEDRA, WANDA
Address: 200 LESLIE DR.
City-St-Zip: HALLANDALE, FL 33009

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: JARRETT OSBORN T 02/27/2007

Electronic Signature of Signing Officer or Director — Date