

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761494

FILED
Apr 23, 2009
Secretary of State

Entity Name: LAKES OF NEWPORT CONDOMINIUM XI ASSOCIATION, INC

Current Principal Place of Business:

7300-7340-7380 N.W. 1ST STREET
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15036
PLANTATION, FL 33318

New Mailing Address:

FEI Number: 59-2429761

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD
SUITE C-207
FT. LAUDERDALE, FL 33312 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: KNIGHT, ALAN
Address: P.O. BOX 15036
City-St-Zip: PLANTATION, FL 33318

Title: VPD () Delete
Name: ZANTA, MICHELE
Address: P.O. BOX 15036
City-St-Zip: PLANTATION, FL 33318

Title: SD () Delete
Name: JOY, MARJORIE
Address: P.O. BOX 15036
City-St-Zip: PLANTATION, FL 33318

Title: TD (X) Delete
Name: PLOURDE, MARILYN
Address: P.O. BOX 15036
City-St-Zip: PLANTATION, FL 33318

Title: D (X) Delete
Name: PLOURDE, EDWIN
Address: PO BOX 15036
City-St-Zip: PLANTATION, FL 33318

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: PLOURDE, MARILYN
Address: P.O. BOX 15036
City-St-Zip: PLANTATION, FL 33318

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 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: MARILYN PLOURDE

TD

04/23/2009

Electronic Signature of Signing Officer or Director

Date