

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768233

FILED  
Apr 01, 2009  
Secretary of State

**Entity Name:** LAGO GRANDE FOUR CONDOMINIUMS ASSOCIATION, INC.

**Current Principal Place of Business:**

2415-2455 W. 67TH PLACE  
6500- 6790 W. 24TH COURT  
HIALEAH, FL 33016

**New Principal Place of Business:**

6520 W 24 CT  
HIALEAH, FL 33016

**Current Mailing Address:**

C/O FLORIDA PROPERTY MANAGEMENT  
5979 NW 151ST STREET SUITE 101  
MIAMI LAKES, FL 33014

**New Mailing Address:**

**FEI Number:** 59-2391204      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FLORIDA'S PROPERTY MANAGEMENT  
5979 NW 151 ST  
SUITE 101  
MIAMI LAKES, FL 33014 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: DOMINQUEZ, EDEL  
Address: 5979 NW 159 STREET  
City-St-Zip: MIAMI LAKES, FL 33014

Title: VD ( ) Delete  
Name: SIERRA, ESTHER  
Address: 5979 NW 151 STREET  
City-St-Zip: MIAMI LAKES, FL 33014

Title: SD ( ) Delete  
Name: ABELL, CELESTE  
Address: 5979 NW 151 STREET  
City-St-Zip: MIAMI LAKES, FL 33014

Title: TD ( ) Delete  
Name: VERDE-RAMO, ADRIANA  
Address: 5979 NW 151 STREET  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D ( ) Delete  
Name: HERNANDEZ, JOSE  
Address: 5979 NW 151 STREET  
City-St-Zip: MIAMI LAKES, FL 33014

**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: ( ) 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: EDEL DOMINGUEZ

PD

04/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date