## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005916

FILED May 20, 2008 Secretary of State

Entity Name: LA MAISON BLANCHE TOWNHOME HOMEOWNER'S ASSOCIATION INC.

**Current Principal Place of Business: New Principal Place of Business:** 

429 HENDRICKS ISLE C/O MARKUS LEHMANN FT LAUDERDALE, FL 33301

**New Mailing Address: Current Mailing Address:** 

1314 E LAS OLAS BLVD C/O MARKUS LEHMANN

C/O REAL FLORIDA REALTY, INC. FT LAUDERDALE, FL 33301 FT LAUDERDALE, FL 33316

FEI Number: 32-0054005 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

LEHMANN, MARKUS 1314 E LAŚ OLAS BLVD #228 FT LAUDERDALE, FL 33301 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:

Electronic Signature of Registered Agent Date

1508 SE 3 AVE

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

D PR (X) Change ( ) Addition () Delete LAMBRECHTS-TALIB, BETTINA LAMBRECHTS, BETTINA Name: Name:

431 HENDRICKS ISLE Address: 1508 SE 3RD AVE. Address: City-St-Zip: FT LAUDERDALE, FL 33301 City-St-Zip: FT LAUDERDALE, FL 33316

Title: () Delete Title: () Change () Addition

ROSENQVIST, THOMAS Name: Name: Address: 427 HENDRICKS ISLE Address: City-St-Zip: FT LAUDERDALE, FL 33301 City-St-Zip:

Title: D TR () Delete Title: () Change () Addition

MARKUS, LEHMANN Name: Name: Address: 429 HENDRICKS ISLE Address: City-St-Zip: FT LAUDERDALE, FL 33301 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: BETTINA LAMBRECHTS **PRES** 05/20/2008