

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005916

FILED
Jul 22, 2009
Secretary of State

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

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

1508 SE 3 AVE
C/O REAL FLORIDA REALTY, INC.
FT LAUDERDALE, FL 33316

New Mailing Address:

PO BOX 460007
C/O REAL FLORIDA REALTY, INC.
FT LAUDERDALE, FL 33346

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:

LEHMANN, MARKUS
1314 E LAS OLAS BLVD #228
FT LAUDERDALE, FL 33301 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: D PR () Delete
Name: LAMBRECHTS, BETTINA
Address: 1508 SE 3RD AVE.
City-St-Zip: FT LAUDERDALE, FL 33316

Title: D VP () Delete
Name: ROSENQVIST, THOMAS
Address: 427 HENDRICKS ISLE
City-St-Zip: FT LAUDERDALE, FL 33301

Title: D TR () Delete
Name: MARKUS, LEHMANN
Address: 429 HENDRICKS ISLE
City-St-Zip: FT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D PR (X) Change () Addition
Name: LAMBRECHTS, BETTINA
Address: PO BOX 460007
City-St-Zip: FT LAUDERDALE, FL 33346

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: BETTINA LAMBRECHTS

PRES

07/22/2009

Electronic Signature of Signing Officer or Director

Date