

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01002

**FILED**  
**Feb 11, 2012**  
**Secretary of State**

**Entity Name:** THE LAKES OF AVALON MASTER ASSOCIATION, INC.

**Current Principal Place of Business:**

8440 NW 190 TERRACE  
MIAMI, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

8440 NW 190 TERRACE  
MIAMI, FL 33015

**New Mailing Address:**

**FEI Number:** 59-2516841

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DE LA CAMARA, ROSA M ESQ.  
ALHAMBRA TOWERS, 121 ALHAMBRA PLAZA  
SUITE 1000, 10TH FLOOR  
CORAL GABLES, FL 33134 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: PVST  
Name: HEALY, JOHN F III  
Address: 8497 NW 191 STREET  
City-St-Zip: MIAMI, FL 33015

I hereby 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 all other like empowered.

SIGNATURE: JOHN F HEALY III

PVST

02/11/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date