

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001998

FILED
Apr 21, 2009
Secretary of State

Entity Name: L'PLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3001 GULF DRIVE
HOLMES BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

3001 GULF DRIVE
HOLMES BEACH, FL 34217

New Mailing Address:

FEI Number: 51-0535210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOULD, BARRY
3001 GULF DRIVE
HOLMES BEACH, FL 34217 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 () Delete
Name: KAUFMAN, GARY
Address: 5837 BELLANCA DR
City-St-Zip: ELKRIDGE, MD 21075

Title: D () Delete
Name: FOSTER, JOHN
Address: 10726 MORGAN RD
City-St-Zip: CATO, WI 54230

Title: D () Delete
Name: RUSHMORE, TOM
Address: 13250 NW HWY 225A
City-St-Zip: REDDICK, FL 32686

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:

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: MICHAEL J NORTHFIELD

MGR

04/21/2009

Electronic Signature of Signing Officer or Director

Date