2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009402

FILED Jul 18, 2008 Secretary of State

Entity Name: LE POINT CONDOMINIUM ASSOCIATION INC

Entity Na	IME: LE POINT CONDOMINIUM ASSOC	CIATION, INC.	
Current F	Principal Place of Business:	New Principal Place of Busi	iness:
	137 AVENUE		
SUITE 21: MIAMI, FL			
Current N	Mailing Address:	New Mailing Address:	
	137 AVENUE		
SUITE 21: MIAMI, FL			
	r: 20-0629693 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation of		ificate of Status Desired ()
Name and	d Address of Current Registered Agen	nt: Name and Address of New F	Registered Agent:
	FICES OF RICHARD F. KONDLA P.A. 137 AVENUE		
	22106 116		
MIAMI, FL	. 33186 US		
MIAMI, FL The above		the purpose of changing its registered office	or registered agent, or both,
MIAMI, FL The above in the Stat	e named entity submits this statement for te of Florida.	the purpose of changing its registered office	or registered agent, or both,
MIAMI, FL The above in the Stat	e named entity submits this statement for te of Florida.		or registered agent, or both, Date
The above in the Stat	e named entity submits this statement for te of Florida. JRE:		Date
MIAMI, FL The above in the Stat SIGNATU	e named entity submits this statement for te of Florida. JRE: Electronic Signature of Registered	d Agent ADDITIONS/CHANGES TO C	Date
MIAMI, FL The above in the Stat SIGNATU OFFICER Title: Name: Address:	e named entity submits this statement for te of Florida. JRE: Electronic Signature of Registered S () Delete MATO, MARLEN 2404 NE 135 STREET	d Agent ADDITIONS/CHANGES TO C Title: () Chan Name: Address: City-St-Zip:	Date DEFICERS AND DIRECTORS

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: CHRIS FIORENTIN P 07/18/2008