

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 22, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000003977

1. Entity Name
LENA COMMONS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**3115 81ST CT E
SUITE 105
BRADENTON, FL 34211**

Mailing Address

**3115 81ST CT E
SUITE 105
BRADENTON, FL 34211**



08132007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

06-1729385

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BORDEAUX, JACQUES
3115 81ST CT E
SUITE 105
BRADENTON, FL 34211**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Abby Bordeaux

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9/13/07

**Filing Fee is \$61.25
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000772584
08/22/07-80005-018 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRES
BORDEAUX, JACQUES
3115 81ST CT E, SUITE 105
BRADENTON, FL 34211**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SEC
BORDEAUX, ABBY
3115 81ST CT E, SUITE 105
BRADENTON, FL 34211**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Abby Bordeaux

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/13/07

Date

Daytime Phone #