

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N05000000253

**FILED**  
**Nov 07, 2012**  
**Secretary of State**

**Entity Name:** LAKE PLACID CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8180 NW 36 STREET  
302  
DORAL, FL 33166 US

**New Principal Place of Business:**

8180 NW 36 STREET  
409  
DORAL, FL 33166 US

**Current Mailing Address:**

PO BOX 22681  
HIALEAH, FL 33002 US

**New Mailing Address:**

**FEI Number:** 20-5196933

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASSOCIATION LAW GROUP, P.L.  
1666 KENNEDY CAUSEWAY  
SUITE 305  
NORTH BAY VILLAGE, FL 33141 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:** LISA KELMAN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** GONZALEZ, RENE  
**Address:** 13910 LAKE PLACID CT  
**City-St-Zip:** MIAMI LAKES, FL 33014

**Title:** S/T  
**Name:** RAMOS, DAVID JR  
**Address:** 13910 LAKE PLACID CT  
**City-St-Zip:** MIAMI LAKES, FL 33014

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:** RENE GONZALEZ

PD

11/07/2012

Electronic Signature of Signing Officer or Director

Date