

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005059

FILED  
Feb 06, 2012  
Secretary of State

**Entity Name:** LAS PALMAS RESORT HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

600 EAST CANFIELD STREET  
AVON PARK, FL 33825

**New Principal Place of Business:**

600 EAST CANFIELD STREET  
AVON PARK, FL 33825 US

**Current Mailing Address:**

2510 NW 97 AVENUE  
200  
DORAL, FL 33172

**New Mailing Address:**

2510 NW 97 AVENUE  
200  
DORAL, FL 33172 US

**FEI Number:** 20-3377572

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FANDINO-CAPIN, BARBARA  
2510 NW 97 AVENUE  
200  
DORAL, FL 33172 US

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

ACOSTA, MARIA C  
2510 NW 97 AVENUE  
200  
DORAL, FL 33172 US

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: MARIA C ACOSTA

02/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CHAVIANO, PEDRO  
Address: 2510 NW 97 AVENUE #200  
City-St-Zip: DORAL, FL 33172 US

Title: VTD  
Name: ARTILES, JUAN A  
Address: 2510 NW 97 AVENUE #200  
City-St-Zip: DORAL, FL 33172 US

Title: SD  
Name: ARBELAEZ, MARTHA  
Address: 2510 NW 97 AVENUE #200  
City-St-Zip: DORAL, FL 33172 US

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: PEDRO CHAVIANO

VP

02/06/2012

Electronic Signature of Signing Officer or Director

Date