2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2009
Secretary of State

DOCUMENT# N05000005402

Entity Name: ARBOR LAKES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

100 ARBOR LAKES CIRCLE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

100 ARBOR LAKES CIRCLE
SANFORD, FL 32771 US

New Mailing Address:

FEI Number: 20-3236474 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES INC
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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: PD ( ) Delete
Name: MANOR, JOSEPH
Address: 1301 INTERNATIONAL PKWY; STE 200
City-St-Zip: SUNRISE, FL 33323

Title: VDST ( ) Delete
Name: ARAVA, MOHAR
Address: 1301 INTERNATIONAL PKWY; STE 200
City-St-Zip: SUNRISE, FL 33323

Title: D ( ) Delete
Name: DANIELL, ORLY
Address: 575 MADISON AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MANOR, JOSEPH
Address: 1301 INTERNATIONAL PKWY; STE 200
City-St-Zip: SUNRISE, FL 33323

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD ( ) Change (X) Addition
Name: ROSEN, RAMI
Address: 1301 INTERNATIONAL PKWY; STE 200
City-St-Zip: SUNRISE, FL 33323

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: JOSEPH MANOR D 04/08/2009

Electronic Signature of Signing Officer or Director — Date