

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 07, 2009  
Secretary of State**

DOCUMENT# N05000006313

Entity Name: MIAMI LAKES TOWN FOUNDATION, INC.

**Current Principal Place of Business:**

15700 NW 67TH AVENUE  
SUITE 302  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

15700 NW 67TH AVENUE  
SUITE 302  
MIAMI LAKES, FL 33014

**New Mailing Address:**

FEI Number: 86-1096739      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EASTMAN, DEBRA  
15700 NW 67TH AVENUE  
SUITE 302  
MIAMI LAKES, FL 33014 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: D ( ) Delete  
Name: REY, ALEX  
Address: 15700 NW 67TH AVENUE, SUITE 302  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D ( ) Delete  
Name: SALAZAR, MARIAELENA  
Address: 15700 NW 67TH AVENUE, SUITE 302  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D ( ) Delete  
Name: EASTMAN, DEBRA  
Address: 15700 NW 67TH AVENUE, SUITE 302  
City-St-Zip: MIAMI LAKES, FL 33014

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: BOCANEGRA, FRANK  
Address: 15700 NW 67TH AVENUE, SUITE 302  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D (X) Change ( ) Addition  
Name: ROIG, EVELYN  
Address: 15700 NW 67TH AVENUE, SUITE 302  
City-St-Zip: MIAMI LAKES, FL 33014

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

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: DEBRA EASTMAN

D

01/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date