

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007525

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** ARCH CREEK LANDING CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1090 NE 129TH STREET  
N MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

C/O COMPLETE PROPERTY MANAGEMENT  
P.O. BOX 402507  
MIAMI BEACH, FL 33140

**New Mailing Address:**

P.O. BOX 402507  
MIAMI BEACH, FL 33140

**FEI Number:** 20-3193481

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COMPLETE PROPERTY MANAGEMENT  
3550 BISCAYNE BLVD  
SUITE #401  
MIAMI, FL 33137 US

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

BAKALAR & ASSOCIATES, P.A.  
150 SOUTH PINE ISLAND ROAD  
SUITE 540  
PLANTATION, FL 33324 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: MICHAEL BAKALAR

04/23/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: LAGO, ROBERTO  
Address: P O BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP/S ( ) Delete  
Name: ROJAS, JESUS  
Address: P O BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Delete  
Name: VELEZ-COLON, SONIA  
Address: P O BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

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

Title: P (X) Change ( ) Addition  
Name: LAGO, ROBERTO  
Address: P.O. BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

Title: D (X) Change ( ) Addition  
Name: VELEZ-COLON, SONIA  
Address: P O BOX 402507  
City-St-Zip: MIAMI BEACH, FL 33140

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: ROBERTO LAGO

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date