

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011658

FILED  
Apr 06, 2009  
Secretary of State

**Entity Name:** MOORINGS AT LANTANA TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

806 EAST WINDWARD WAY  
SUITE 122  
LANTANA, FL 33462

**New Principal Place of Business:**

**Current Mailing Address:**

806 EAST WINDWARD WAY  
SUITE 122  
LANTANA, FL 33462

**New Mailing Address:**

**FEI Number:** 20-3819760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DE LATARRO & SOGEL P.A.  
201 ALHONGRA CIRCLE STE 11  
CORAL GABLES, FL 33189 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: P ( ) Delete  
Name: MCFARLENE, CHRIS  
Address: 1917 HORWON STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: TS ( ) Delete  
Name: LIPNER, MICHAEL  
Address: 136 MOORING DRIVE  
City-St-Zip: LANTANA, FL 33462

Title: VP ( ) Delete  
Name: HESS, SUSAN  
Address: 236 MOORING DRIVE  
City-St-Zip: LANTANA, FL 33462

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

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

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

Title: VP (X) Change ( ) Addition  
Name: FUNT, SETH  
Address: 326 MOORING DRIVE  
City-St-Zip: LANTANA, FL 33462

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: SETH FUNT

VP

04/06/2009

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

\_\_\_\_\_  
Date