

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Oct 16, 2007
Secretary of State**

DOCUMENT# N05000012269

Entity Name: LAGUNA BAY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2121 PONCE DE LEON BOULEVARD PH
CORAL GABLES, FL 33134**New Principal Place of Business:**3959 NORTH LINCOLN AVENUE
CHICAGO, IL 60613**Current Mailing Address:**2121 PONCE DE LEON BOULEVARD PH
CORAL GABLES, FL 33134**New Mailing Address:**3959 NORTH LINCOLN AVENUE
CHICAGO, IL 60613

FEI Number: 20-4881728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:REGISTERED AGENTS OF FLORIDA, LLC
100 SOUTHEAST SECOND STREET
SUITE 2900
MIAMI, FL 33132130 US**Name and Address of New Registered Agent:**BARNETT, LISA H ESQ.
821 FIFTH AVENUE SOUTH
SUITE 201
NAPLES, FL 34102 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: LISA H. BARNETT, ESQ.

10/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: CAMPS, ORLANDO
Address: 2121 PONCE DE LEON BOULEVARD PH
City-St-Zip: CORAL GABLES, FL 33134Title: VASD () Delete
Name: MADES, MARA
Address: 2121 PONCE DE LEON BOULEVARD PH
City-St-Zip: CORAL GABLES, FL 33134Title: STD () Delete
Name: WOLFE, LEON
Address: 2121 PONCE DE LEON BOULEVARD PH
City-St-Zip: CORAL GABLES, FL 33134**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: GUATTARE, GEORGE
Address: 3959 NORTH LINCOLN AVENUE
City-St-Zip: CHICAGO, IL 60613Title: SD (X) Change () Addition
Name: DENDRINOS, TINA
Address: 3959 NORTH LINCOLN AVENUE
City-St-Zip: CHICAGO, IL 60613Title: D (X) Change () Addition
Name: STODDER, TIM
Address: 3959 NORTH LINCOLN AVENUE
City-St-Zip: CHICAGO, IL 60613

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: GEORGE GUATTARE

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10/16/2007

Electronic Signature of Signing Officer or Director

Date