2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012527

FILED Apr 28, 2009 Secretary of State

Entity Name: LEJEUNE SEGOVIA NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
24 ALME ORAL G	RIA AVE ABLES, FL 33134			
urrent N	lailing Address:	New Mailing Address	s:	
24 ALME ORAL G	RIA AVE ABLES, FL 33134			
El Number	: FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
lame and	Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
DOO LEJE	EUNE ROAD			
SUITE 540 ORAL G. The above) ABLES, FL 33134 US e named entity submits this statement for th e of Florida. RE:		d office or registered agent, or both,	
SUITE 540 CORAL G. The above In the State) ABLES, FL 33134 US e named entity submits this statement for th e of Florida.		d office or registered agent, or both, Date	
SUITE 540 CORAL G. The above In the State) ABLES, FL 33134 US e named entity submits this statement for th e of Florida. RE:	Agent		
SUITE 540 CORAL G. The above In the State	ABLES, FL 33134 US named entity submits this statement for the of Florida. RE: Electronic Signature of Registered A	Agent	Date	
CORAL G. The above The above The State SIGNATUI DFFICER title: ame: ddress:	ABLES, FL 33134 US e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered A S AND DIRECTORS: D () Delete COOK, WENDY 424 ALMERIA AVE	Agent ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR	

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: RHONDA A. ANDERSON D 04/28/2009