

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Nov 05, 2007  
Secretary of State**

DOCUMENT# N06000001490

**Entity Name:** TWIN LAKES PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1475 W. CYPRESS CREEK RD., SUITE 202  
FT. LAUDERDALE, FL 33309**New Principal Place of Business:****Current Mailing Address:**1475 W. CYPRESS CREEK RD., SUITE 202  
FT. LAUDERDALE, FL 33309**New Mailing Address:**

FEI Number: 20-4393462

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**CLIFFORD I. HERTZ, P.A.  
ONE N. CLEMATIS ST., SUITE 500  
W. PALM BCH, FL 33401 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: PORRAS, MARA  
Address: 1475 W. CYPRESS CREEK RD., SUITE 202  
City-St-Zip: FT. LAUDERDALE, FL 33309Title: VT ( ) Delete  
Name: BAND, ROBERT  
Address: 1475 W. CYPRESS CREEK RD., SUITE 202  
City-St-Zip: FT. LAUDERDALE, FL 33309**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change ( ) Addition  
Name: GOLDSTEIN, DANIEL  
Address: 1475 W. CYPRESS CREEK RD., SUITE 202  
City-St-Zip: FT. LAUDERDALE, FL 33309Title: ( ) 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: ROBERT BAND

VT

11/05/2007

Electronic Signature of Signing Officer or Director

Date