

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002736

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** THE MIRAGE AT SAILBOAT COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1700 NW 143 STREET  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

C/O LISA LEHNER, RECEIVER  
149 E FLAGLER ST., SUITE 1422  
MIAMI, FL 33131

**New Mailing Address:**

C/O JOSE DUARTE, MERCANTILCOMMERCE BANK  
220 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33145

**FEI Number:** 14-2002996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LISA LEHNER, RECEIVER  
169 E. FLAGLER ST. SUITE 1422  
MIAMI, FL 33131 US

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

C/O JOSE DUARTE, MERCANTILCOMMERCE BANK  
220 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33145 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: JOSE DUARTE

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JOSE DUARTE, MERCANTILCOMMERCE BANK  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33145

I hereby 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 all other like empowered.

SIGNATURE: JOSE DUARTE

P

04/20/2011

Electronic Signature of Signing Officer or Director

Date