

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003065

FILED  
Feb 22, 2011  
Secretary of State

**Entity Name:** LEEWARD ISLES II HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O M & E ASSOCIATES OF MIAMI INC.  
13055 SW 42 STREET, SUITE 203  
MIAMI, FL 33175

**New Principal Place of Business:**

M & E ASSOCIATES OF MIAMI INC.  
13055 SW 42 STREET, SUITE 203  
MIAMI, FL 33175

**Current Mailing Address:**

C/O M & E ASSOCIATES OF MIAMI INC.  
13055 SW 42 STREET, SUITE 203  
MIAMI, FL 33175

**New Mailing Address:**

M & E ASSOCIATES OF MIAMI INC.  
13055 SW 42 STREET, SUITE 203  
MIAMI, FL 33175

**FEI Number:** 20-5519124

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ASSOCIATION LAW GROUP, PL  
1666 KENNEDY CAUSEWAY  
SUITE 305  
NORTH BAY VILLAGE, FL 33141 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  
Name: HERRERA, MARIA CAROLINA  
Address: 730 NW 107TH AVENUE, 4TH FLOOR  
City-St-Zip: MIAMI, FL 33172

Title: VP  
Name: BALUJA, TERESA  
Address: 730 NW 107TH AVENUE, 4TH FLOOR  
City-St-Zip: MIAMI, FL 33172

Title: T/S  
Name: MOCCIA, LORIE  
Address: 730 NW 107TH AVENUE, 4TH FLOOR  
City-St-Zip: MIAMI, FL 33172

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: MARIA CAROLINA HERRERA

P

02/22/2011

Electronic Signature of Signing Officer or Director

Date