2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004084

FILED Apr 28, 2007 Secretary of State

Entity Name: LANTERN SQUARE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2665 SOUTH BAY SHORE DRIVE SUITE 1102 2665 S BAYSHORE DR MIAMI, FL 33133 STE 1102

MIAMI, FL 33133

Current Mailing Address: New Mailing Address:

2665 SOUTH BAY SHORE DRIVE SUITE 1102 2665 S BAYSHORE DR MIAMI, FL 33133

STE 1102

MIAMI, FL 33133

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

ALBERTELLI & HALSEMA, P.L. VIVIAN Z DIMOND 5200 BELFORT RD STE 250 2665 S BAYSHORE DR JACKSONVILLE, FL 32256 US STE 1102 MIAMI, FL 33133 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: VIVIAN Z DIMOND 04/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete DIMOND, VIVIAN Z DIMOND, VIVIAN Z Name: Name:

2665 S BAY SHORE DR STE 1102 Address: 2665 S BAY SHORE DR STE 1102 Address:

City-St-Zip: MIAMI, FL 33133 City-St-Zip: MIAMI, FL 33133

Title: VSD Title: S/TR (X) Change () Addition () Delete

Name: NAVARRO, RAMON Name: PEREDO, MICHAEL

Address: 2665 S BAY SHORE DR STE 1102 Address: 2665 S BAY SHORE DR STE 1102

City-St-Zip: MIAMI, FL 33133 City-St-Zip: MIAMI, FL 33133

Title: (X) Delete Title: () Change () Addition

PEREDO, MICHAEL Name: Name: 2665 S BAY SHORE DR STE 1102 Address: Address: City-St-Zip: MIAMI, FL 33133 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: VIVIAN Z DIMOND PNP 04/28/2007