2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004084

FILED Apr 30, 2008 Secretary of State

Entity Name: LANTERN SQUARE CONDOMINIUM ASSOCIATION, INC.

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

2665 S BAYSHORE DR 1141 KENDALL TOWN BLVD STE 1102 CLUBHOUSE E2

MIAMI, FL 33133 JACKSONVILLE, FL 32225

Current Mailing Address: New Mailing Address:

2665 S BAYSHORE DR 2665 S BAYSHORE DR STE 1102 STE M-102

MIAMI, FL 33133 MIAMI, FL 33133

FEI Number: 20-5145827 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 VIVIAN Z DIMOND
 DIMOND, VIVIAN Z

 2665 S BAYSHORE DR
 7420 SW 49TH CT.

 STE 1102
 MIAMI, FL 33143 US

 MIAMI, FL 33133 US
 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 04/30/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 DIMOND, VIVIAN Z
 Name:
 DIMOND, VIVIAN Z

 Address:
 2665 S BAY SHORE DR STE 1102
 Address:
 2665 S BAY SHORE DR M-102

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

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

 Name:
 PEREDO, MICHAEL
 Name:
 SORIANO, SUZANNE

 Address:
 2665 S BAY SHORE DR STE 1102
 Address:
 2665 S BAY SHORE DR M-102

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

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 P/VP 04/30/2008