2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N11668

Entity Name: LA MIRADA AT BOCA POINTE CONDOMINIUM ASSOCIATIONNUMBER NINE, INC.

Current Principal Place of Business:

C/O PRIME MGMT. GROUP
6300 PARK OF COMMERCE BOULEVARD
BOCA RATON, FL 33487 US

New Principal Place of Business:

C/O PRIME MGMT. GROUP
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

Current Mailing Address:

C/O PRIME MGMT. GROUP
6300 PARK OF COMMERCE BOULEVARD
BOCA RATON, FL 33487 US

New Mailing Address:

C/O PRIME MGMT. GROUP
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

FEI Number: 59-2680316 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWATT, MYRON
C/O PRIME MGMT. GROUP
6300 PARK OF COMMERCE BOULEVARD
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

SCHNER, LARRY E PA
C/O PRIME MGMT. GROUP
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 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: LARRY E. SCHNER, PA 04/17/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PFEIFFER, ALAN
Address: 7710 LA MIRANA R
City-St-Zip: BOCA RATON, FL 33433

Title: PD ( ) Delete
Name: SANETTI, IDA
Address: 7974 LAMIRADA DR
City-St-Zip: BOCA RATON, FL 33433

Title: D ( ) Delete
Name: WEISS, MARTIN
Address: 7973 LG MIRADA DR
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PFEFFER, ALAN
Address: 7710 LA MIRADA DR
City-St-Zip: BOCA RATON, FL 33433

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: WEISS, MARTIN
Address: 7973 LA MIRADA DR
City-St-Zip: BOCA RATON, FL 33433

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: IDA SANETTI PD 04/17/2009
Electronic Signature of Signing Officer or Director Date