

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17446

FILED
Feb 10, 2009
Secretary of State

Entity Name: MARINA LAKE COMMERCIAL CONDOMINIUM XI ASSOCIATION, INC.

Current Principal Place of Business:

4990 SW 72ND AVE
STE. 100
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

PO BOX 172633
MIAMI, FL 33017 US

New Mailing Address:

FEI Number: 59-2731777

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METELNIKOW, FRED
4904 B SW 72 AVE
MIAMI, FL 33155 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: TC () Delete
Name: METELNIKOW, FRED
Address: 4990 SW 72ND AVE., #100
City-St-Zip: MIAMI, FL 33155

Title: M () Delete
Name: SIDA, PACHECO
Address: 4900 S.W. 72ND AVE., #101
City-St-Zip: MIAMI, FL 33155

Title: S () Delete
Name: ST GEORGE, MARIA
Address: 7364 SW 48 ST
City-St-Zip: MIAMI, FL 33155

Title: VP () Delete
Name: ARRUE, ARMANDO
Address: 4990 SW 72 AVE, 107
City-St-Zip: MIAMI, FL 33155

Title: P () Delete
Name: CERDA, MARTIN
Address: 1990 S.W. 72 AVE., #110
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MARTIN CERDA

PRES

02/10/2009

Electronic Signature of Signing Officer or Director

Date