

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20988

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** SWALLOW LODGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

CHARLENE NAVARRO  
421 SWALLOW DR #11  
MIAMI SPRINGS, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

CHARLENE NAVARRO  
421 SWALLOW DR #11  
MIAMI SPRINGS, FL 33166 US

**New Mailing Address:**

**FEI Number:** 65-0098228

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NAVARRO, CHARLENE  
421 SWALLOW DR #11  
MIAMI SPRINGS, FL 33166 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: DPT  
Name: NAVARRO, CHARLENE  
Address: 421 SWALLOW DR, # 11  
City-St-Zip: MIAMI, FL 33166

Title: DV  
Name: MARIMON, ANTONIO  
Address: 421 SWALLOW DR, # 4  
City-St-Zip: MIAMI, FL 33166

Title: DS  
Name: NAZARKEVICH-BATKIS, MAUREEN  
Address: 421 SWALLOW DRIVE, UNIT #7  
City-St-Zip: MIAMI SPRINGS, FL 33166

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: CHARLENE NAVARRO

PRES

04/12/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date