

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

DOCUMENT# N21182

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** LAGO GRANDE 5-D CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5600 SW 135 AVE  
SUITE 104  
MIAMI, FL 33183

**New Principal Place of Business:**

900 W. 49 STREET, SUITE 220  
HIALEAH, FL 33012

**Current Mailing Address:**

5600 SW 135 AVE  
SUITE 104  
MIAMI, FL 33183

**New Mailing Address:**

900 W. 49 STREET, SUITE 220  
HIALEAH, FL 33012

**FEI Number:** 65-0122171

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FEIN & MELONI, PA  
900 S.W. 40 AVENUE  
MIAMI, FL 33317 US

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

DELATORRE, CLEMENTE J  
900 W. 49 STREET, SUITE 220  
HIALEAH, FL 33012 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: CLEMENTE J. DELATORRE

04/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MIELGO, JULIA  
Address: 900 W. 49 STREET, SUITE 220  
City-St-Zip: HIALEAH, FL 33012

Title: TD  
Name: TRETO, MERCEDES  
Address: 900 W. 49 STREET, SUITE 220  
City-St-Zip: HIALEAH, FL 33012

Title: SD  
Name: GONZALEZ, RAQUEL  
Address: 900 W. 49 STREET, SUITE 220  
City-St-Zip: HIALEAH, FL 33012

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: JULIA MIELGO

PD

04/18/2011

Electronic Signature of Signing Officer or Director

Date