

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N23629

FILED
Dec 18, 2008
Secretary of State

Entity Name: ELAN AT CALUSA CONDOMINIUM IX ASSOCIATION, INC.

Current Principal Place of Business:

C/O BONAFIDE MANAGEMENT
3100 NW 72 AVENUE, #127
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

C/O BONAFIDE MANAGEMENT
P.O. BOX 521458
MIAMI, FL 33152 US

New Mailing Address:

FEI Number: 65-0092127 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BONAFIDE MANAGEMENT
3100 NW 72 AVENUE
127
MIAMI, FL 33122 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: RICARDO RUSSI

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUAREZ, ROSALBA
Address: 10357 S.W. 88TH LANE
City-St-Zip: MIAMI, FL 33183

Title: VPD () Delete
Name: PINEDA, GRACIELA
Address: 13043 S.W. 88 LANE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
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: RICARDO RUSSI

MGR

12/18/2008

Electronic Signature of Signing Officer or Director

Date