## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N25796

FILED Apr 07, 2009 Secretary of State

Entity Name: THE LAKES AT LA PAZ CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Plac	New Principal Place of Business:	
	ΓARY TRAIL D BEACH, FL	33442	US			
Current Mailing Address:				New Mailing Addre	New Mailing Address:	
	TARY TRAIL D BEACH, FL	33442	US	C/O ROYAL MANAG 707 5TH ST MIAMI BEACH, FL 3		
FEI Number:	65-0050470	FEI Num	nber Applied For ( ) FE	El Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
ROYAL MANAGEMENT GROUP 707 5TH STREET MIAMI BEACH, FL 33139 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:						
Electronic Signature of Registered Agent Date						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () I VINIAR, LEO V 7507 LA PAZ BL BOCA RATON, F			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P () I MARINELLI, JAN 16 WILLIAMSBU FT SALONGA, N	IRG DRIVE	Ē	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () I CITRON, ROBER 7507 LA PAZ BL BOCA RATON, F	VD N-403		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () I GOLD, CYNTHIA 7519 LAPAZ BLV BOCA RATON, F	/D. C-207		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () I FELDMAN, SUZA 7507 LA PAZ BL BOCA RATON, F	VD. 408		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: MARINELLI, JAMES P 04/07/2009