

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27833

FILED
Mar 01, 2006
Secretary of State

Entity Name: GABLES LAROC CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

441 VALENCIA AVE
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

7154-B SOUTH WEST 47TH STREET
MIAMI, FL 33155 US

New Mailing Address:

FEI Number: 65-0105755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CADICORP MANAGEMENT GROUP
7154-B SOUTH 47TH STREET
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: P () Delete
Name: PANEBIANCO, FRANK
Address: 441 VALENCIA AVENUE, #1201
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD () Delete
Name: MANCILLA, SERGIO
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: TD () Delete
Name: AZATE, NESTOR
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: SD () Delete
Name: BOCLES, HILDA
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: WOODS, JOHN
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: ANDERSON, SYDNEY
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: FUENTES, OTTO
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: TD (X) Change () Addition
Name: WOOD, JOHN
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

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

Title: D (X) Change () Addition
Name: HERTZ, BARBARA
Address: 441 VALENCIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANK PANEBIANCO

PD

03/01/2006

Electronic Signature of Signing Officer or Director

Date