2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED May 08, 2009 DOCUMENT# N27833 Secretary of State

Entity Name: GABLES LAROC CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 441 VALENCIA AVE CORAL GABLES, FL 33134 LIS **Current Mailing Address: New Mailing Address:** 7700 NORTH KENDALL DRIVE PENTHOUSE PH-802 MIAMI, FL 33156 FEI Number: 65-0105755 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CADICORP MANAGEMENT GROUP 7700 NORTH KENDALL DRIVE PENTHOUSE PH-802 MIAMI, FL 33156 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/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CISNEROS, ROGELIO W Name: Name: 441 VALENCIA AVENUE Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: DS () Delete Title: () Change () Addition HERNANDEZ, MARTA R Name: Name: Address: 441 VALENCIA AVENUE Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: (X) Change () Addition VENEGA, DORA C MANZARBEITIA, MARTA P Name: Name: 441 VALENCIA AVENUE Address: Address: 441 VALENCIA AVENUE City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: () Change () Addition Name: HERTZ, BARBARA V Name: Address: 441 VALENCIA AVENUE Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: (X) Change () Addition BRACHE, JOSE A LOPEZ-ONA, DIANA Name: Name: 441 VALENCIA AVENUE 441 VALENCIA AVENUE Address: Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 Title: (X) Delete Title: () Change () Addition MANZARBEITIA, MARTA Name: Name: Address: 441 VALENCIA AVENUE Address: CORAL GABLES, FL 33134 City-St-Zip: 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: REGELIO W CISNEROS PD 05/08/2009