

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33879

FILED
Mar 04, 2009
Secretary of State

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

Current Principal Place of Business:

5800 8834 SW 130 CT
MIAMI, FL 33186 US

New Principal Place of Business:

800 - 8834 SW 130 CT
MIAMI, FL 33186 US

Current Mailing Address:

PO BOX 653637
MIAMI, FL 33265 US

New Mailing Address:

FEI Number: 65-0180841

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETANCOURT, MARITEA
17 W FLAGLER ST #720
BETANCOURT MENA & ASSOC
FORT LAUDERDALE, FL 333130 US

Name and Address of New Registered Agent:

FRANK PEREZ SIAM AND ASSOCIATES
7001 SW 87TH CT
MIAMI, FL 33173 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: FRANK PEREZ

03/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAKDAR-AZZOUZ, WAFI
Address: 8822 SW 130 COURT
City-St-Zip: MIAMI, FL 33186

Title: S () Delete
Name: PORTA, ROGER
Address: 8818 SW 130 COURT
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: FERNANDEZ, KATHY
Address: 8810 SW 130 CT
City-St-Zip: MIAMI, FL 33186

Title: P () Delete
Name: MARTINEZ, ROBERTO
Address: 8824 SW 130 CT
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LAKHDAR-AZZOUZ, WAFI
Address: PO BOX 653637
City-St-Zip: MIAMI, FL 33265

Title: S (X) Change () Addition
Name: PORTA, ROGER
Address: PO BOX 653637
City-St-Zip: MIAMI, FL 33265

Title: T (X) Change () Addition
Name: FERNANDEZ, KATHY
Address: PO BOX 653637
City-St-Zip: MIAMI, FL 33265

Title: P (X) Change () Addition
Name: MARTINEZ, GABRIELA
Address: PO BOX 653637
City-St-Zip: MIAMI, FL 33265

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: GABRIELA MARTINEZ

P

03/04/2009

Electronic Signature of Signing Officer or Director

Date