

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45864

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** ENCINO AT GRAND PALMS 2 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

MIAMI MGMT  
15805 SW 11 ST  
HOLLYWOOD, FL 33027 US

**New Principal Place of Business:**

GRAND PALMS  
15805 SW 11 ST  
PEMBROKE PINES, FL 33027 US

**Current Mailing Address:**

15805 SW 11 ST  
PEMBROKE PINES, FL 33027 US

**New Mailing Address:**

GRAND PALMS  
15805 SW 11 ST  
PEMBROKE PINES, FL 33027 US

**FEI Number:** 65-0295848

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRIAY, CARLOS P.A.  
SQUARE ONE BUSINESS CENTER  
SUITE 103  
MIAMI, FL 33172 US

**Name and Address of New Registered Agent:**

NACHMAN, IRVIN  
4111 STIRLING ROAD  
FT. LAUDERDALE, FL 33314 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: IRVIN NACHMAN

01/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VS ( ) Delete  
Name: GEL, ELDEMIRE  
Address: 15157 ENCINO CIRCLE NORTH  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: SD ( ) Delete  
Name: LEHRMAN, SUSAN  
Address: 14943 SW 15TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: TD ( ) Delete  
Name: SIEH, ROBERT  
Address: 15165 SWISS STREET  
City-St-Zip: PEMBROKE PINES, FL 33027

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ELDEMIRE, GELI  
Address: 15157 SW 15 STREET  
City-St-Zip: PEMBROKE PINES, FL 33027

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

Title: TD (X) Change ( ) Addition  
Name: SIEH, ROBERT  
Address: 15165 SW 15 STREET  
City-St-Zip: PEMBROKE PINES, FL 33027

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: GELI ELDEMIRE

PRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date