

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47406

FILED
May 01, 2007
Secretary of State

Entity Name: 1446 LENOX CONDO ASSOCIATION, INC.

Current Principal Place of Business:

1446 LENOX AVE.
MIAMI BCH., FL 33139 US

New Principal Place of Business:

Current Mailing Address:

C/O REARCH MANAGEMENT CORPORATION
901 PONCE DE LEON STE 505
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0383273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RESEARCH MANAGEMENT CORPORATION
901 PONCE DE LEON BOULEVARD
SUITE #505
CORAL GABLES, FL 33134 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:

Title: S () Delete
Name: BAKKUM, LORI
Address: 1446 LENOX AVE #5
City-St-Zip: MIAMI BEACH, FL 33139

Title: T () Delete
Name: KRAMER, MARILYN
Address: 1446 LENOX AVE 7
City-St-Zip: MIAMI BEACH, FL 33139

Title: P () Delete
Name: FRANOSZEK, TOBIAS
Address: 1446 LENOX AVE. #1
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: LORI BAKKUM

S

05/01/2007

Electronic Signature of Signing Officer or Director

Date