SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name N96000001446 (1)

LAGUNA PONDS HOMEOWNERS ASSOCIATION, INC.

Mailing Address Principal Place of Business 12460 S.W. 119TH AVENUE 12460 S.W. 119TH AVENUE MIAMI FL 33177 MIAMI FL 33177

Aug 18 1997 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

	•								3. Date Incorp. 03/15	orated or Qualified // 1996	3a. Da	te of Last H	port	
2. Principal P	lace of Busin	ness	2a. M	2a. Mailing Address					4. FEI Number Applied For					
21				26					Not Applicable					
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional Fee Required					
22				27										
City & State				City & State					6. Election Car	mpaign Financing		\$5.00	May Be	
23			28						Trust Fund Contribution Added to Fees					
Zip						Country			8. This corporation owes or has paid the current year Intengible					
24		25 and Address of Curre	***	30				Personal Property Tax due June 30. Yes X No						
		041		10. Name and Address of New Registered Agent										
							81 Name Bertran Ruben							
MURAI, WALD, BIONDO & MORENO, P.A.						82 Street Address (P.O. Box Number is Not Acceptable)								
25 S.E. 2ND AVENUE							14260 5.W. 119 Ave							
SUITE 900														
MIAMI FL 33131							City .	<u>.</u> .				85 Zip (Code	
				<u>Mia</u>	ımi		FL	<u> 33</u>	Code 5 1 8 6					
11. Pursuant	to the provis	sions of Sections 617.05	02 and 617	.1508, Florida Statu	tes, the a	bove d hv	-named	corpor	ration submits things to be a submits the	s statement for the p	urpose of	changing it cintment as	s registered registered	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered eigent, for both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.														
SIGNATURE	1	$\mathcal{C}(\mathcal{O})$	$\mathcal{C}_{\mathcal{C}}$	~~								124 1	1)	
5,5,1,1,5,1,5	Stgnature, types	or printed name of registered a				d Ager	nt signature	required	when reinstating)		DATE	<u> </u>	0.114.40	
12.		OFFICERS AT	ID DIRECT		13.				ADDITIONS/0	CHANGES TO OFFIC	ERS AND	M Change	S IN 12 Addition	
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NAME ROSSELLI, ALFONSO						2.2 NAME								
STREET ADDRESS 14260 S.W. 119TH AVENUE						2.3 STREET ADDRESS								
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I do nereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changes, on an attachment with an address.