2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001486

FILED Feb 10, 2009 Secretary of State

Entity Name: LAUDERDALE BEACH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3403 N.E. 27TH STREET FORT LAUDERDALE, FL 33308 **Current Mailing Address: New Mailing Address:** 3403 N.E. 27TH STREET FORT LAUDERDALE, FL 33308 FEI Number: 59-2381510 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: LAUDERDALE BEACH HOMEOWNER'S ASSOCIATION 3403 N.E. 27TH STREET FORT LAUDERDALE, FL 33308 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: (X) Change () Addition () Delete STEINBERG, DAWN AMOROSINO, JOE Name: Name: 2416 N. ATLANTIC BLVD. Address: 2725 CENTER AVE. Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308 Title: Title: (X) Change () Addition () Delete GRAHAM, GARTH Name: GRAHAM, GARTH E Name: Address: 2720 CENTER AVE. Address: 2720 CENTER AVE. City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308 Title: () Delete Title: () Change () Addition DONAHOE, BRAD DR, Name: Name: Address: 2915 CENTER AVENUE Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: () Delete Title: Title: (X) Change () Addition AMOROSINO, JOE Name: Name: FRANKE, LORI Address: 2725 CENTER AVE. Address: 3509 VISTA PARK City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: FORT LAUDERDALE, FL 33308 Title: (X) Delete Title: () Change () Addition FRANKE, LORI Name: Name: 3509 VISTA PARK Address: Address: FORT LAUDERDALE, FL 33308 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: GARTH E GRAHAM D 02/10/2009