

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003516

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** LAKEVIEW AT THE GARDENS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9837 W OKEECHOBEE RD  
HIALEAH, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5103  
HIALEAH, FL 33014

**New Mailing Address:**

**FEI Number:** 65-0841684

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, ANITA  
CAM MANAGEMENT  
6065 NW 167TH ST UNIT B-19  
MIAMI LAKES, FL 33015 US

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

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:** TD  
**Name:** SALINA, REGLA  
**Address:** 9837 WEST OKEECHOBEE RD SUITE 401  
**City-St-Zip:** HIALEAH GARDENS, FL 33016

**Title:** SD  
**Name:** PORTILLO, ROGER  
**Address:** 9837 WEST OKEECHOBEE RD SUITE 605  
**City-St-Zip:** HIALEAH GARDENS, FL 33016

**Title:** PD  
**Name:** RODRIGUEZ, MONICA  
**Address:** 9837 W OCKEECHOBEE RD #305  
**City-St-Zip:** HIALEAH GARDENS, FL 33016

I hereby 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 all other like empowered.

**SIGNATURE:** MONICA RODRIGUEZ

P/DT

03/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date