

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 25, 2008
Secretary of State

DOCUMENT# N97000006429

Entity Name: LINCOLN ROAD VILLAS SOUTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1610-1612-1616 MICHIGAN AVENUE
MIAMI BEACH, FL 33139**New Principal Place of Business:****Current Mailing Address:**175 FONTAINEBLEAU BOULEVARD
1A-3
MIAMI, FL 33172**New Mailing Address:****FEI Number:** 65-0828291**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAMOS, GABRIEL
175 FONTAINEBLEAU BOULEVARD
1A-3
MIAMI, FL 33172 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:** PD () Delete
Name: BENOIT, ANGELA V
Address: 1610 MICHIGAN AVE APT # 5
City-St-Zip: MIAMI BEACH, FL 33139**Title:** TD () Delete
Name: KIERNAN, THERESA
Address: 703 NE 88 STREET
City-St-Zip: MIAMI, FL 33139**Title:** SD () Delete
Name: RODRIGUEZ, RONALD
Address: 1616 MICHIGAN AVE APT # 6
City-St-Zip: MIAMI BEACH, FL 33139**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD (X) Change () Addition
Name: WOODWARD, JOHN
Address: 1616 MICHIGAN AVE APT #10
City-St-Zip: MIAMI BEACH, FL 33139**Title:** SD (X) Change () Addition
Name: CAPOTE, BETTY
Address: 1616 MICHIGAN AVE APT # 3
City-St-Zip: MIAMI BEACH, FL 33139

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: ANGELA V. BENOIT

PD

03/25/2008

Electronic Signature of Signing Officer or Director_____
Date