## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9800000344

FILED Jul 12, 2009 Secretary of State

Entity Name: LAUDERGATE ISLES CIVIC ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
2130 NE <sup>^</sup> FORT LA	15 ST UDERDALE, FL 33304			
Current N	Mailing Address:	New Mailing Address	s:	
2130 NE <sup>·</sup> FORT LA	15 ST UDERDALE, FL 33304			
	nce with s. 607.193(2)(b), F.S., the corporation did	-	Certificate of Status Desired ( )	
name and	d Address of Current Registered Agent:	Name and Address o	f New Registered Agent:	
2130 NE 1	N, AMY JONES 15TH STREET UDERDALE, FL 33304 US			
	e named entity submits this statement for the te of Florida.	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	IRE:			
	Electronic Signature of Registered A	nont.	Data	
	Electronic orginature of Neglistered A	gent	Date	
OFFICER	S AND DIRECTORS:		ES TO OFFICERS AND DIRECTORS	
Fitle: Name: Address:				
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	PD () Delete WILLIAMS, REX 2 037 NE 2130 NE 15 ST	ADDITIONS/CHANGE Title: Name: Address:	ES TO OFFICERS AND DIRECTORS	
OFFICER  Title: Name: Address: City-St-Zip: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Address: City-St-Zip:	PD () Delete WILLIAMS, REX 2 037 NE 2130 NE 15 ST FORT LAUDERDALE, FL 33304  DV () Delete HAMILTON, AMY 2130 NE 15 ST	ADDITIONS/CHANGE  Title: Name: Address: City-St-Zip:  Title: Name: Address:	ES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address:	PD () Delete WILLIAMS, REX 2 037 NE 2130 NE 15 ST FORT LAUDERDALE, FL 33304  DV () Delete HAMILTON, AMY 2130 NE 15 ST FORT LAUDERDALE, FL 33304  TD () Delete MUTTI, FRANCESCO 2106 NE 15 ST	ADDITIONS/CHANGE  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: Address:	ES TO OFFICERS AND DIRECTORS  ( ) Change ( ) Addition  ( ) Change ( ) Addition	

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: FRANCESCO MUTTI TD 07/12/2009