

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006824

FILED
Apr 25, 2008
Secretary of State

Entity Name: LINCOLN ROAD VILLAS EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1611 WEST AVE
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

PO BOX 415342
MIAMI BEACH, FL 33141

New Mailing Address:

FEI Number: 65-0883713 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE WALL MANAGEMENT CORP
1440 J.F. KENNEDY CAUSEWAY
SUITE 429-C
NORTH BAY VILLAGE, FL 33141 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: VD (X) Delete
Name: JACOBS, COLIN
Address: 1611 WEST AVE #15
City-St-Zip: MIAMI BEACH, FL 33139

Title: PD () Delete
Name: PEREZ, BASILIA
Address: 65 OLIVE DR
City-St-Zip: HIALEAH, FL 33010

Title: SD () Delete
Name: MALOVE, RACHEL K
Address: 1611 WEST AVE #02
City-St-Zip: MIAMI BEACH, FL 33139

Title: DT (X) Delete
Name: VIGANEGO, LUIS
Address: 1688 WEST AVE #809
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PEREZ, BASILIA
Address: 65 OLIVE DR
City-St-Zip: HIALEAH, FL 33010

Title: ST (X) Change () Addition
Name: MALOVE, RACHEL K
Address: 1611 WEST AVE #02
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P () Change (X) Addition
Name: TACAO, GISELA
Address: 1611 WEST AVE#07
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: ORLANDO DE LUIZ

RA

04/25/2008

Electronic Signature of Signing Officer or Director

_____ Date