

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006824

FILED
Jun 12, 2009
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:

1611 WEST AVENUE
MIAMI BEACH, FL 33139

Current Mailing Address:

PO BOX 415342
MIAMI BEACH, FL 33141

New Mailing Address:

PO BOX 402507
MIAMI BEACH, FL 33140

FEI Number: 65-0883713 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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:

BAKALAR & ASSOCIATES, P.A.
150 SOUTH PINE ISLAND ROAD
SUITE 540
PLANTATION, FL 33324 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: MICHAEL BAKALAR

06/12/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

Title: P (X) Delete
Name: TACAO, GISELA
Address: 1611 WEST AVE#07
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TACAO, GISELA
Address: PO BOX 402507
City-St-Zip: MIAMI BEACH, FL 33140

Title: ST (X) Change () Addition
Name: MALOVE, RACHEL K
Address: PO BOX 402507
City-St-Zip: MIAMI BEACH, FL 33140

Title: () Change () Addition
Name:
Address:
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: GISELA TACAO

P

06/12/2009

Electronic Signature of Signing Officer or Director

Date