

**2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 725252

**Entity Name:** NARANJA LAKES CONDOMINIUM NO. FIVE, INC.

**Current Principal Place of Business:**

27501 SO. DIXIE HIGHWAY  
206-209  
HOMESTEAD, FL 33032

**Current Mailing Address:**

27501 SO. DIXIE HIGHWAY  
206-209  
HOMESTEAD, FL 33032 US

**FEI Number: 59-1873201**

**Certificate of Status Desired: No**

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

PAUL A. MCKENNA AND ASSOCIATES, P.A.  
1360 SOUTH DIXIE HIGHWAY  
SUITE 100  
CORAL GABLES, FL 33146 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT/D  
Name            HERNANDEZ, ALFRED  
Address        14850 NARANJA LAKES BLVD #3L  
City-State-Zip: HOMESTEAD FL 33032

Title            VP  
Name            LUIGI , GUIDOTTI  
Address        7582 SW 157 PLACE  
City-State-Zip: MIAMI FL 33193

Title            TREASURER  
Name            REBECCA, RAMOS  
Address        11779 SW 92 TERRACE  
City-State-Zip: MIAMI FL 33186

Title            DIRECTOR  
Name            JIMMY , DIEP  
Address        15461 SW 144 COURT  
City-State-Zip: MIAMI FL 33177

Title            SECRETARY  
Name            LUIS , MARICHAL  
Address        13877 SW 258 STREET  
City-State-Zip: HOMESTEAD FL 33032

Title            DIRECTOR  
Name            ODALMIS, PRIETO  
Address        13877 SW 258 STREET  
City-State-Zip: HOMESTEAD FL 33032

Title            DIRECTOR  
Name            LUISA, WALLO  
Address        23044 SW 107 PLACE  
City-State-Zip: MIAMI FL 33032

*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: ALFRED HERNANDEZ**

**PRESIDENT**

**08/11/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date