

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740893

Entity Name: LE JEUNE GARDENS HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 06, 2021
Secretary of State
9743778430CC

Current Principal Place of Business:

1500 NW 89 COURT
SUITE 202
DORAL, FL 33172

Current Mailing Address:

1500 NW 89 COURT
SUITE 202
DORAL, FL 33172 US

FEI Number: 65-0127240

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARLA, JONES ESQ
550 NE 124 STREET
NORTH MIAMI, FL 33161 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	T/D	Title	VP/D
Name	BROWN, CASSANDRA	Name	STOKES, SYLVIA MS
Address	1500 NW 89 COURT SUITE 202	Address	1500 NW 89 COURT SUITE 202
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172
Title	P/D	Title	DIRECTOR
Name	AMBROSE, MARIO MR	Name	GUERRA, JUAN
Address	1500 NW 89 COURT SUITE 202	Address	1500 NW 89 COURT SUITE 202
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172
Title	SECRETARY	Title	DIRECTOR
Name	BROWN, CYNTHIA D	Name	HERNANDEZ, MELVIN
Address	1500 NW 89 COURT SUITE 202	Address	1500 NW 89 COURT SUITE 202
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172
Title	DIRECTOR		
Name	CELHOMME JEAN, FRANCOIS		
Address	1500 NW 89 COURT SUITE 202		
City-State-Zip:	DORAL FL 33172		

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: CASSANDRA BROWN

TREASURER

04/06/2021

Electronic Signature of Signing Officer/Director Detail

Date