

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740893

Entity Name: LE JEUNE GARDENS HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 09, 2016
Secretary of State
CC0874656029

Current Principal Place of Business:

4050 NW 181 LANE
MIAMI GARDENS, FL 33055

Current Mailing Address:

P.O. BOX 171638
HIALEAH, FL 33017 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
Name WILLIAMS, CASSANDRA MS
Address 4050 NW 181 LANE
City-State-Zip: MIAMI GARDENS FL 33055

Title VP/D
Name STOKES, SYLVIA MS
Address 18003 NW 41 PLACE
City-State-Zip: MIAMI GARDENS FL 33055

Title P/D
Name AMBROSE, MARIO MR
Address 17948 NW 40 CT
City-State-Zip: MIAMI GARDENS FL 33055

Title DIRECTOR
Name GUERRA, JUAN
Address 18226 NW 40 COURT
City-State-Zip: MIAMI FL 33055

Title DIRECTOR
Name JOHNSON, ROY
Address 431 NE 134 STREET
City-State-Zip: NORTH MIAMI FL 33161

Title DIRECTOR
Name BROWN, CYNTHIA D
Address 4030 NW 181 LANE
City-State-Zip: MIAMI FL 33055

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: MARIO AMBROSE

PRESIDENT

03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date