

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 745936

**Entity Name:** L'HERMITAGE OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2000 SOUTH BAYSHORE DRIVE  
MIAMI, FL 33133**Current Mailing Address:**2000 SOUTH BAYSHORE DRIVE  
MIAMI, FL 33133**FEI Number:** 59-2089772**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ARCHER, JOHN MR.  
2000 SOUTH BAYSHORE DRIVE VILLA#53  
MIAMI, FL 33133 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:** JOHN ARCHER

05/09/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           ARCHER, JOHN MR.  
Address       2000 SOUTH BAYSHORE DRIVE  
City-State-Zip: MIAMI FL 33133

Title           DIRECTOR  
Name           KAUFFMANN, MICHELLE MRS..  
Address       2000 SOUTH BAYSHORE DRIVE,  
                VILLA #47  
City-State-Zip: MIAMI FL 33133

Title           DIRECTOR  
Name           MIRANDA, BRUNO MR.  
Address       2000 SOUTH BAYSHORE DRIVE.  
                VILLA#33  
City-State-Zip: MIAMI FL 33133

Title           DIRECTOR  
Name           ORLANDO, PATRICK  
Address       2000 SOUTH BAYSHORE DRIVE  
                VILLA# 20  
City-State-Zip: MIAMI FL 33133

Title           DIRECTOR  
Name           FREEDLINE, ALLAN MR.  
Address       2000 SOUTH BAYSHORE DRIVE,  
                VILLA #08  
City-State-Zip: MIAMI FL 33133

Title           DIRECTOR  
Name           ARTOIS, GASTON MR.  
Address       2000 SOUTH BAYSHORE DRIVE.  
                VILLA#10  
City-State-Zip: MIAMI FL 33133

Title           DIRECTOR  
Name           RANSOM, RANDEL MR.  
Address       2000 SOUTH BAYSHORE DRIVE VILLA  
                #39  
City-State-Zip: MIAMI FL 33133

Title           DIRECTOR  
Name           KREEGER, JUDITH  
Address       2000 SOUTH BAYSHORE DRIVE  
                VILLA#61  
City-State-Zip: MIAMI FL 33133

**Continues on page 2**

*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:** JOHN ARCHER

TREASURER

05/09/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	THOMSON, PAUL
Address	2000 SOUTH BAYSHORE DRIVE VILLA#32
City-State-Zip:	MIAMI FL 33133