

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769569

FILED
Apr 09, 2014
Secretary of State
CC9027115946**Entity Name:** LAKEVIEW AT THE HAMMOCKS CONDOMINIUM "C"
ASSOCIATION, INC.**Current Principal Place of Business:**C/O MIAMI MANAGEMENT, INC.
14275 SW 142ND AVE
MIAMI, FL 33186**Current Mailing Address:**C/O MIAMI MANAGEMENT, INC.
14275 SW 142ND AVE
MIAMI, FL 33186 US**FEI Number:** 59-2314397**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRIAY, CARLOS A PA
2301 NW 87TH AVE
SUITE 501
DORAL, FL 33172 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:** CARLOS A TRIAY, PA

04/09/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	GALYA, WILLIAM
Address	14275 SW 142ND AVE
City-State-Zip:	MIAMI FL 33186

Title	VP, DIRECTOR
Name	KLOVEKORN, HENRY
Address	14275 SW 142ND AVE
City-State-Zip:	MIAMI FL 33186

Title	SECRETARY, DIRECTOR
Name	ZULUAGA, BLANCA
Address	14275 SW 142ND AVE
City-State-Zip:	MIAMI FL 33186

Title	TREASURER, DIRECTOR
Name	OLAYA, EFRAIN
Address	14275 SW 142ND AVE
City-State-Zip:	MIAMI FL 33186

Title	DIRECTOR
Name	GRAY, RUSSELL J
Address	14275 SW 142ND AVE
City-State-Zip:	MIAMI FL 33186

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: WILLIAM GALYA

PRESIDENT

04/09/2014

Electronic Signature of Signing Officer/Director Detail

Date