

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N08000002156

**Entity Name:** FONTAINEBLEAU LAKES SINGLE FAMILY HOMES WEST HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3750 NW 87 AVE #260  
DORAL, FL 33172

**Current Mailing Address:**

3750 NW 87 AVE #260  
DORAL, FL 33172 US

**FEI Number:** 26-1974662

**Certificate of Status Desired:** No

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

SKRLD INC  
201 ALHAMBRA CIRCLE, 11TH FLOOR  
CORAL GABLES, FL 33134 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:** SIEGFRIED RIVERA

09/27/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEMUS, ARNO  
Address        C/O CAM BROKERAGE &  
                  MANAGEMENT  
                  3750 NW 87 AVE SUITE #260  
City-State-Zip: DORAL FL 33178

Title            DIRECTOR  
Name            ALMANZA, JOSE  
Address        C/O CAM BROKERAGE &  
                  MANAGEMENT  
                  3750 NW 87 AVE SUITE #260  
City-State-Zip: DORAL FL 33178

Title            VP  
Name            DE TORRES, MAYRA  
Address        C/O CAM BROKERAGE &  
                  MANAGEMENT  
                  3750 NW 87 AVE SUITE #260  
City-State-Zip: DORAL FL 33178

Title            TREASURER  
Name            RODRIGUEZ, EDITH  
Address        C/O CAM BROKERAGE &  
                  MANAGEMENT  
                  3750 NW 87 AVE SUITE #260  
City-State-Zip: DORAL FL 33178

Title            SECRETARY  
Name            NEKOIE, NIMA  
Address        C/O CAM BROKERAGE &  
                  MANAGEMENT  
                  C/O CAM SUITE #260  
City-State-Zip: DORAL FL 33178

*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:** ARNO LEMUS

PRESIDENT

09/27/2024

Electronic Signature of Signing Officer/Director Detail

Date