

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35072

Entity Name: LAGO DEL REY CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**

C/O NEW HORIZONS PROPERTY MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
MIAMI LAKES, FL 33016

Current Mailing Address:

C/O NEW HORIZONS PROPERTY MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
MIAMI LAKES, FL 33016, FL 33016 US

FEI Number: 65-0194392**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

NEW HORIZONS PROPERTY MANAGEMENT SOLUTIONS, LLC.
C/O NEW HORIZONS PROPERTY MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
MIAMI LAKES, FL 33016, FL 33016 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: DAVID MENENDEZ

01/05/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name DANTAS, ARNON
Address C/O NEW HORIZONS PROPERTY
MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
City-State-Zip: MIAMI LAKES, FL 33016 FL 33016

Title P
Name CORREA, MELVA
Address C/O NEW HORIZONS PROPERTY
MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
City-State-Zip: MIAMI LAKES, FL 33016 FL 33016

Title TREASURER
Name ROBAINA, EDUARDO
Address C/O NEW HORIZONS PROPERTY
MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
City-State-Zip: MIAMI LAKES, FL 33016 FL 33016

Title SECRETARY
Name VARONA, GONZALO
Address C/O NEW HORIZONS PROPERTY
MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
City-State-Zip: MIAMI LAKES, FL 33016 FL 33016

Title DIRECTOR
Name CALLEJAS, JAVIER
Address C/O NEW HORIZONS PROPERTY
MANAGEMENT SOLUTIONS, LLC.
14411 COMMERCE WAY #316
City-State-Zip: MIAMI LAKES, FL 33016 FL 33016

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: MELVA CORREA

PRESIDENT

01/05/2024

Electronic Signature of Signing Officer/Director Detail

Date