


2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 710495 1. Entity Name LAKE PARK GARDENS #2 INC., A CONDOMINIUM	
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FILED
07 JUN 13 AM 8:08
TALLAHASSEE, FLORIDA

Principal Place of Business 4751 NW 10TH COURT APT 102 PLANTATION, FL 33313 US	Mailing Address 4751 NW 10TH COURT APT 102 PLANTATION, FL 33313 US
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2. Principal Place of Business - No P.O. Box # 4751 NW 10th Court Suite, Apt. #, etc. # 304	3. Mailing Address 4751 NW 10th Cour Suite, Apt. #, etc. # 304
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06092007 Chg-NP CR2E037 (12/06)

City & State Plantation Florida Zip 33313	City & State Plantation Florida Zip 33313
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4. FEI Number 59-1147872	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent BENNINGTON, CONNIE. 4751 NW 10TH COURT 102 PLANTATION, FL 33313	7. Name and Address of New Registered Agent Name Guy G Roumain Street Address (P.O. Box Number is Not Acceptable) 4751 N.W. 10th Court #304 City Plantation FL Zip Code 33313
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Guy G Roumain* DATE 6/12/2007

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD	<input checked="" type="checkbox"/> Delete		TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	THOMSA, JAMES			NAME	Guy G Roumain PD		
STREET ADDRESS	4751 NW 10 COURT #206			STREET ADDRESS	4751 NW 10th Court # 304		
CITY-ST-ZIP	PLANTATION, FL 33313			CITY-ST-ZIP	Plantation FL 33313		
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BENNINGTON, CONNIE			NAME	Ignatio Gonzalez		
STREET ADDRESS	4751 NW 10 COURT #102			STREET ADDRESS	4751 N.W 10th Court # 112 Treasurer		
CITY-ST-ZIP	PLANTATION, FL 33313			CITY-ST-ZIP	Plantation FL 33313		
TITLE		<input type="checkbox"/> Delete		TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<i>[Signature]</i>			NAME	Allison RAMJITSINGH		
STREET ADDRESS				STREET ADDRESS	4751 NW 10th Court # 214 Secretary		
CITY-ST-ZIP				CITY-ST-ZIP	Plantation FL 33313		
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Guy G Roumain* *Guy G Roumain* DATE 6/12/2007 954-292-4215

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #