


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # 714113	
1. Entity Name LAKESIDE POINT APARTMENT NO 11 ASSOCIATION, INC.	

Principal Place of Business C/O ASSET BOOKEEPING 903 ST JAMES ST WEST PALM BEACH, FL 33415	Mailing Address C/O ASSET BOOKEEPING 903 ST JAMES ST WEST PALM BEACH, FL 33415
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DO NOT WRITE IN THIS SPACE



01102008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1317005	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'DONNELL, EILEEN SEC
 2381 SUNSET AVENUE
 APT 201
 LAKE WORTH, FL 33461

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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 _____ (NOTE: Registered Agent signature required when reinstating)

U00000782179
 01/15/08 2008-022-01-25
 DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP CARREAU, JAMES 2381 SUNSET AVE 212 LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ENILA, MATTIE 2381 SUNSET AVENUE 402 LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LIST, CHARLES 2381 SUNSET AVE 304 LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD O'DONNELL, EILEEN 2381 SUNSET AVE #201 LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOODS, JOYCE 2381 SUNSET AVE 206 LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP ROBUCK, JOHN 2381 SUNSET AVE #501B LAKE WORTH, FL 33461

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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:  **5-10-08 585-8939**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #