


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

07 MAY 23 PM 1:56

ALL OF STATE
TALLAHASSEE, FLORIDA
66015647

DOCUMENT # 720829			
1. Entity Name LAUDERDALE OAKS CONDOMINIUM XII, INC.			
Principal Place of Business 3001 NW 46TH AVE BLDG 12 LAUDERDALE LAKES, FL 33313-1827		Mailing Address C/O CASTLE MGMT INC P.O. BOX 559009 FORT LAUDERDALE, FL 33355	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
02152007		Chg-NP CR2E037 (12/06)	
4. FEI Number 59-1370025		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
GLICKMAN, LARRY Z ESQ. 301 YAMATO ROAD, SUITE 4150 SACHS, SAX, KLEIN BOCA RATON, FL 33431		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 reissuing) DATE _____			
Filing Fee is \$81.25 Due by May 1, 2007		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	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LEWIS, ROWENA 3001 NW 46 AVE 2009 FORT LAUDERDALE, FL 33313 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, GEORGE 3001 NW 46TH AVENUE #307 LAUDERDALE LAKES, FL 33313 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PERALDO, MARGHERITA 3001 NW 46 AVE, #409 LAUDERDALE LAKES, FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Margy</i> SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DIXON, CLAIRE 3001 NW 46 AVE, #407 LAUDERDALE LAKES, FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROENEVELD, HARRY 3001 NW 46TH AVENUE #404 LAUDERDALE LAKES, FL 33313 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COUTU, JEAN 3001 NW 46 AVE, #303 LAUDERDALE LAKES, FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LE CLAIR, RAYMOND 3001 NW 46TH AVENUE LAUDERDALE LAKES, FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAGENAIS, J.C. 3001 NW 46 AVE #408 LAUDERDALE LAKES, FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Margherita G Peraldo</i> - MARGHERITA G PERALDO		5/8/07 954-733-3657	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	