2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#728260

FILED Mar 06, 2007 Secretary of State

Entity Name: LAKEWOOD ON THE GREEN CONDOMINIUM 1 ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1750 UNIVERSITY DR #205 5481 WEST ATLANTIC BLVD CORAL SPRINGS, FL 33071

108

MARGATE, FL 33063

Current Mailing Address: New Mailing Address:

1750 UNIVERSITY DR #205 5481 WEST ATLANTIC BLVD CORAL SPRINGS, FL 33071

MARGATE, FL 33063 US

FEI Number: 59-1536387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SWIFT MANAGEMENT & SOLUTIONS LAKEWOOD ON THE GREEN CONDO I 1750 UNIVERSITY DR #205 5481 WEST ATLANTIC BLVD

CORAL SPRINGS, FL 33071 US

MARGATE, FL 33063 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: JACQUELINE BERMUDEZ 03/06/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete KNIGHT, HARRIET ROSENBERG, STEVEN Name: Name:

5525 LAKEWOOD CIRCLE N Address: 5525 LAKEWOOD CIR N Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063

Title: () Delete Title: (X) Change () Addition

ROSENBERG, STEVEN Name: MARKOSKI, GREGORY Name: Address: 5525 LAKEWOOD CIR N Address: 5515 LAKEWOOD CIR N City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063

Title: DS () Delete Title: (X) Change () Addition SLOANE, MARIE BERMUDEZ, JACQUELINE Name: Name: 5545 N LAKEWOOD CIR Address: Address: 5515 LAKEWOOD CIR N City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063

Title: () Delete Title: SD () Change (X) Addition

Name: Name: DEMATOS, ROMICARLA Address: Address: 5535 LAKEWOOD CIR N City-St-Zip: City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JACQUELINE BERMUDEZ TD 03/06/2007