2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2009
Secretary of State

DOCUMENT# 728260

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

Current Principal Place of Business:

5481 WEST ATLANTIC BLVD
108
MARGATE, FL 33063 US

New Principal Place of Business:

Current Mailing Address:

5481 WEST ATLANTIC BLVD
108
MARGATE, FL 33063 US

New Mailing Address:

C/O RMS ACCOUNTING
2319 N ANDREWS AVENUE
FORT LAUDERDALE, FL 33311 US

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

Name and Address of Current Registered Agent:

LAKEWOOD ON THE GREEN CONDO I
5481 WEST ATLANTIC BLVD
108
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BERMUDEZ, JACQUELINE
Address: 5515 N LAKEWOOD CIRCLE #124
City-St-Zip: MARGATE, FL 33063

Title: VD ( ) Delete
Name: MARKOSKI, GREGORY
Address: 5515 LAKEWOOD CIR N #121
City-St-Zip: MARGATE, FL 33063

Title: TD (X) Delete
Name: DEMATOS, ROMICARLA
Address: 5535 LAKEWOOD CIR N #311
City-St-Zip: MARGATE, FL 33063

Title: SD ( ) Delete
Name: GAGNE, SUSAN
Address: 5515 LAKEWOOD CIR N #112
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: MILLSAP, SUSAN
Address: 5515 LAKEWOOD CIR N #112
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify 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 PD 01/29/2009

Electronic Signature of Signing Officer or Director — Date