## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT #749977** 

## FILED Mar 05, 2008 8:00 am Secretary of State

03-05-2008 90022 025 \*\*\*\*61.25

LAKÉ COLONY HOMEOWNERS ASSOCIATION, INC. 40038352 Principal Place of Business Mailing Address 2994 JOE RD 2328 S. CONGRESS AVE., STE 1C WEST PALM BEACH, FL 33406 SUITE B GREENACRES, FL 33467 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082008 Chg-NP CR2E037 (12/06) City & State City & State Applied For 4. FEI Number 59-1971312 Not Applicable \$8.75 Additional Fee Required Country Country 5...Certificate of Status Desired... 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ZANGEN, ALAN S'P.A. Street Address (P.O. Box Number is Not Acceptable) 1200 CORPORATE CENTER WAY STE. 201 WELLINGTON, FL 33414 City 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 Signature, typed or printed name of registered agent and little if applicable DATE (NOTE: Registered Agent signature required when reinstalling) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. SP Addition 1 Delete TITLE TITLE silen Campbell NAME COUGHANOUR, FRANK NAME 4024-D PALM BAY CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33406 CITY-ST-ZIP TITLE Delete TITLE REA. PATRICK NAME NAME 4034A PALM BAY CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33406 CITY-ST-7IP TITLE TIME **X**i Defete NAME GRIFFIN, DEC NAME STREET ADDRESS 4107 C PALM BAY CIR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33406 TITLE TITLE CAMPBELL, ELLEN NAME NAME 4091 A PALM BAY CIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BCH, FL 33406 TITLE TITLE Delete ZAPF, HEATHER NAME STREET ADDRESS 4007B PALM BAY CIR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH, FL 33406 Delete TITLE

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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

SEAL, RENEE

4111 D PALM BAY CIR

WEST PALM BEACH, FL 33406

AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

2/22/08 805-

805-7818 Daylime Phone #