


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **764181** (4)

1. Corporation Name

LAKE VIEW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**5026 WATER OAK DRIVE
BRADENTON FL 34207
US**

**P. O. BOX 10674
BRADENTON FL 34262
US**



3. Date Incorporated or Qualified

07/16/1982

4. FEI Number

59-2373870

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?
☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C&S CONDO MANAGEMENT SERVICES INC.
4301 32ND ST W. SUITE C-14
SUITE C7
BRADENTON FL 34205**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4301 32nd St W

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	SD	<input type="checkbox"/> DELETE
NAME	ROHRBACH, CARLOTTA	
STREET ADDRESS	5026 WATER OAK DR #102	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	VP/D	<input type="checkbox"/> DELETE
NAME	SEARCY, JOAN	
STREET ADDRESS	5026 WATER OAK DRIVE #217	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	P/D	<input checked="" type="checkbox"/> DELETE
NAME	HILLING, BETTY	
STREET ADDRESS	5026 WATER OAK DRIVE #102	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	T/D	<input type="checkbox"/> DELETE
NAME	HARPER, RENEE	
STREET ADDRESS	5026 WATER OAK DR #103	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	D/D	<input type="checkbox"/> DELETE
NAME	KONECY, CINDY	
STREET ADDRESS	5026 WATER OAK DRIVE #209	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

4/17/98 941-963-2895

CR2E037 (10/97)