

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Jan 18, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A07089**

1. Entity Name  
**LAKE EAST ASSOCIATES, LTD.**



Principal Place of Business  
**C/O NATIONAL DEV. CORP.  
4415 FIFTH AVE.  
PITTSBURGH, PA 15213**

Mailing Address  
**C/O NATIONAL DEV. CORP.  
4415 FIFTH AVE.  
PITTSBURGH, PA 15213**



01062006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**25-1379721**

Applied For  
**Not Applicable**

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**ANSBACHER & SCHNEIDER, P.A.  
5150 BELFORT ROAD  
BUILDING 100  
JACKSONVILLE, FL 32256**

**DO NOT WRITE  
IN THIS SPACE**

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 title if applicable

DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # **449514**  
NAME **WESTCO BUILDERS INC.**  
STREET ADDRESS **2902 59TH ST. W., STE. N**  
CITY-ST-ZIP **BRADENTON, FL**

DOCUMENT # **P31335**  
NAME **NDC REALTY INVESTMENTS, INC.**  
STREET ADDRESS **4415 FIFTH AVE.**  
CITY-ST-ZIP **PITTSBURGH, PA**

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CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
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01/23/06 80011-014 508.75

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE: Shane A Connor, Diane G. Connor, VP**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1626

412-578-7891

Date

Daytime Phone #

STAPLE CHECK HERE