


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # N03000003284
 1. Entity Name
 LINDGREN LAKE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 13020 SW 116 STREET MIAMI, FL 33186-4609	Mailing Address 13020 SW 116 STREET MIAMI, FL 33186-4609
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01082006 No Chg-NP CR2E037 (11/05)

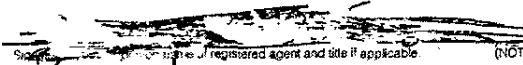
DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BRAIN, JENNY V
 13020 SW 116 STREET
 MIAMI, FL 33186-4609

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  DATE 1-8-06

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	BRAIN, JENNY
STREET ADDRESS	13020 SW 116 STREET
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	D
NAME	GEIS, JOHN
STREET ADDRESS	12764 SW 112 TERR
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	D
NAME	HOWARD, ROBERT
STREET ADDRESS	12981 SW 117 STREET
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	VD
NAME	KALDOR, MICHAEL
STREET ADDRESS	12930 SW 116 STREET
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	PD
NAME	SOSA, RANDY
STREET ADDRESS	11404 SW 127 COURT
CITY - ST - ZIP	MIAMI, FL 33186
TITLE	D
NAME	MEDINA, DYNIS
STREET ADDRESS	11640 SW 128 COURT
CITY - ST - ZIP	MIAMI, FL 33186

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U00000383417
 01/12/06-80052-012 61.25

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.

SIGNATURE: Jenny V. Brain Date 1-8-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #