

# 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N05000007268

1. Entity Name  
LAKEVIEW CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business  
2819 N. OAKLAND FOREST DR.  
FORT LAUDERDALE, FL 33309

Mailing Address  
STERLING MANAGEMENT SERVICES  
2876 SCHERER DRIVE N., SUITE 100  
SAINT PETERSBURG, FL 33716

FILED  
07 OCT 10 PM 2:02  
TALLAHASSEE, FLORIDA



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10032007

Chg-NP

CR2E037 (12/06)

4. FEI Number  
20-3201007

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

DONALD HILLEY  
860 US HWY 1 STE 108  
N PALM BEACH, FL 33408

7. Name and Address of New Registered Agent

Name Rhonda Hollander

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

1861 N. Federal Hwy. #191

City Hollywood

FL

Zip Code 33020

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME RO, JOE  
STREET ADDRESS 2871 N. OAKLAND FOREST DR. #209  
CITY-ST-ZIP OAKLAND PARK, FL 33309 ☒ Delete

TITLE TD  
NAME GARCIA, ANGELA  
STREET ADDRESS 2810 N. OAKLAND FOREST DR. #107  
CITY-ST-ZIP OAKLAND PARK, FL 33309 ☒ Delete

TITLE SD  
NAME DOS SANTOS, CECILE  
STREET ADDRESS 2818 N. OAKLAND FOREST DR.  
CITY-ST-ZIP OAKLAND PARK, FL 33309 ☒ Delete

TITLE VPD  
NAME OWENS, FRED  
STREET ADDRESS 2841 N. OAKLAND FORREST DR. #106  
CITY-ST-ZIP OAKLAND PARK, FL 33309 ☒ Delete

TITLE D  
NAME SCHATTIC, THOMAS  
STREET ADDRESS 2881 N. OAKLAND FORREST DR. #107  
CITY-ST-ZIP OAKLAND, FL 33309 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME RO, JOE  
STREET ADDRESS 2819 N. Oakland Forest Dr.  
CITY-ST-ZIP Oakland Park, FL 33309 ☒ Change ☐ Addition

TITLE UPD  
NAME OWENS, FREDERICK E.  
STREET ADDRESS 2819 N. Oakland Forest Dr.  
CITY-ST-ZIP Oakland Park, FL 33309 ☒ Change ☐ Addition

TITLE TD  
NAME ~~ANGELA~~ GARCIA, ANGELA  
STREET ADDRESS 2819 N. Oakland Forest Dr.  
CITY-ST-ZIP Oakland Park, FL 33309 ☒ Change ☐ Addition

TITLE SD  
NAME KOVALS, JUDITH  
STREET ADDRESS 2819 N. Oakland Forest Dr.  
CITY-ST-ZIP Oakland Park, FL 33309 ☐ Change ☒ Addition

TITLE D  
NAME BRENTON, STEVE  
STREET ADDRESS 2819 N. Oakland Forest Dr.  
CITY-ST-ZIP Oakland Park, FL 33309 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

10/1/07 954-801-1580