

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 08, 2007
Secretary of State**

DOCUMENT# N05000008225

Entity Name: VILLAS AT LAKEVIEW CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5200 NW 31ST AVENUE
FT. LAURDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

5200 NW 31ST AVENUE
FT. LAURDERDALE, FL 33309

New Mailing Address:

FEI Number: 20-3384651 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATLANTIC & PACIFIC MANAGEMENT
800 PALM TRAIL
SUITE 2
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: POWELL, ERIC
Address: 5200 NW 31ST AVENUE
City-St-Zip: FT. LAURDERDALE, FL 33309

Title: SEC () Delete
Name: HUDSON, DONNA
Address: 5200 NW 31ST AVENUE
City-St-Zip: FT. LAURDERDALE, FL 33309

Title: TRES () Delete
Name: RUBIN, NORM
Address: 5200 NW 31ST AVENUE
City-St-Zip: FT. LAURDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HUDSON, DONNA
Address: 5200 NW 31ST AVENUE
City-St-Zip: FT. LAURDERDALE, FL 33309

Title: VP (X) Change () Addition
Name: RUBIN, NORM
Address: 5200 NW 31ST AVENUE
City-St-Zip: FT. LAURDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS SMITH

Electronic Signature of Signing Officer or Director

DIR.

03/08/2007

Date