2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State
04-21-2004 90013 004 ****61.25

DOCUMENT # N07367

1. Entity Name
THE LAKES OF PGA NATIONAL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O CUSTOM PROPERTY MANAGEMENT 2328 S CONGRESS AVE STE 2A WEST PALM BEACH, FL 33406 US	C/O CUSTOM PROPERTY MANAGEMENT 2328 S CONGRESS AVE STE 2A WEST PALM BEACH, FL 33406 US

J40007360

03082004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0052375 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KABUAUTS, HARRY 114 WATERVIEW DR WEST PALM BEACH, FL 33418	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

Filing Fee is $61.25
Due by May 1, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RABINOVITZ, HARRY 114 WATERVIEW DR PALM BEACH GRDNS, FL 33418	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD RABINOVITZ, HARRY 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD POMPER, LEWIS 110 WATERVIEW DR WEST PALM BEACH, FL 33418	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CASSELLA, CAROL 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DORTENZO, CAROL 108 WATERVIEW DR PALM BCH GARDENS, FL 33418	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD D'ORTENZO,CAROL 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MORRIS, MARILYN 109 WATERVIEW DR WEST PALM BEACH, FL 33418	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MORRIS, MARILYN 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BALCARCZYK, KLAUS 2328 S. CONGRESS AVE., SUITE 2A WEST PALM BEACH, FL 33406	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	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 exemption stated in Section 119.07(3)(i), 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: _____ 4-14-04 561 439-1433
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Harry Rabinovitz