


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90040 011 ****61.25

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1. Entity Name
 LAKE PARK AT FOREST RIDGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
~~C/O SUNRISE MANAGEMENT SVCS,
 7071 W. COMMERCIAL BLVD #28
 TAMARAC, FL 33319 US~~

Mailing Address
~~C/O SUNRISE MANAGEMENT SVCS,
 7071 W. COMMERCIAL BLVD #28
 TAMARAC, FL 33319 US~~

40067566



2. Principal Place of Business - No P.O. Box #
 96 The Continental Group

3. Mailing Address
 2950 N 28 Terrace

Suite, Apt. #, etc.
 2950 N 28 Terrace

01082008 Chg-NP CR2E037 (12/06)

City & State
 Hollywood, FL

City & State
 Hollywood, FL

Zip Country
 33020 Broward

Zip Country
 33020 Broward

4. FEI Number
 65-0534268

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EISINGER, DENNIS
 4000 HOLLYWOOD BLVD
 #265 S
 HOLLYWOOD, FL 33021

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

7. Name and Address of New Registered Agent

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, 2008

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	VPD	<input checked="" type="checkbox"/> Delete
NAME	HARRIS, DEBORAH	
STREET ADDRESS	2601 LAKE PARK WEST	
CITY-ST-ZIP	DAVIE, FL 33328	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	BARDASH, TOM	
STREET ADDRESS	9012 LAKE PARK CIRCLE SOUTH	
CITY-ST-ZIP	DAVIE, FL 33328	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MIRAGIN, BEN	
STREET ADDRESS	9145 LAKE PARK CIRCLE SOUTH	
CITY-ST-ZIP	DAVIE, FL 33328	
TITLE	D	<input type="checkbox"/> Delete
NAME	FIX, RICHARD	
STREET ADDRESS	9142 LAKE PARK CIRCLE SOUTH	
CITY-ST-ZIP	DAVIE, FL 33328	
TITLE	DS	<input type="checkbox"/> Delete
NAME	WALSH, MICHAEL	
STREET ADDRESS	8986 LAKE PARK CIRCLE SOUTH	
CITY-ST-ZIP	DAVIE, FL 33328	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEFF RUBINOFF	
STREET ADDRESS	2623 LAKE PARK CIRCLE E.	
CITY-ST-ZIP	DAVIE, FL 33328	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MIRAGLIA, BEN	
STREET ADDRESS	9145 LAKE PARK CIRCLE S	
CITY-ST-ZIP	DAVIE, FL 33328	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Ben Miraglia 2/22/08

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