

FILE NOW: FILING FEE IS \$61.25

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Apr 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 711194 (1)
1. Corporation Name
LAKE CLARKE GARDENS CONDOMINIUM, INC.



Principal Place of Business 2981 FLORIDA MANGO ROAD LAKE WORTH FL 33461-6268	Mailing Address 2981 FLORIDA MANGO ROAD LAKE WORTH FL 33461-6268
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3. Date Incorporated or Qualified 07/14/1966	3a. Date of Last Report 04/24/1996
4. FEI Number 59-1426780	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent
**HARDY, DONALD
2615 S. GARDEN DRIVE. #408
LAKE WORTH FL 33461**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	T <input type="checkbox"/> DELETE
NAME	WENSTROM, ELDEN
STREET ADDRESS	2769 S GARDEN DR #101
CITY - ST - ZIP	LAKE WORTH FL
TITLE	VPD <input type="checkbox"/> DELETE
NAME	ROBBINS, HAROLD E.
STREET ADDRESS	2728 NO. GARDEN DR #213
CITY - ST - ZIP	LAKE WORTH FL 33461
TITLE	AS <input type="checkbox"/> DELETE
NAME	TURNBERGER, DOROTHY
STREET ADDRESS	2628 S GARDEN DR. #103
CITY - ST - ZIP	LAKE WORTH FL 33461
TITLE	P <input type="checkbox"/> DELETE
NAME	HARDY, DONALD D.
STREET ADDRESS	2615 S. GARDEN DR. #408
CITY - ST - ZIP	LAKE WORTH FL
TITLE	D <input type="checkbox"/> DELETE
NAME	GERALD BLANKE
STREET ADDRESS	2724 NO. GARDEN DRIVE, #201
CITY - ST - ZIP	LAKE WORTH FL
TITLE	S <input type="checkbox"/> DELETE
NAME	RICHARD SCHUDEKOPF
STREET ADDRESS	2581 N. GARDEN DRIVE, #310
CITY - ST - ZIP	LAKE WORTH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Donald D Hardy* **4-10-97**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0043626

CR2E037 (9/96)