2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#720508

FILED Aug 08, 2005 Secretary of State

Entity Name: LAKESIDE MANOR NORTH ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5900 NW 17TH PL

FORT LAUDERDALE, FL 33313

Current Mailing Address: New Mailing Address:

5900 NW 17TH PL 5900 NW 17TH PL

BUILDING'S OFFICE FORT LAUDERDALE, FL 33313 FORT LAUDERDALE, FL 33313

FEI Number: 59-1402294 FEI Number Applied For () FEI Number Not Applicable ()

Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMPERSAD, R. DEBROAH RAMPERSAD, DEBROAH R 5900 NW 17TH PL 5900 NW 17TH PL

UNIT 210 UNIT 210 SUNRISE, FL 33313 US SUNRISE, FL 33313 US

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: DEBORAH R RAMPERSAD 08/08/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD **PRES** () Delete (X) Change () Addition

LEWIS, LYNCOLN SOLIS, HERMAN Name: Name: 5900 NW 17TH PL #113 Address: 5900 NW 17TH PL #201 Address: SUNRISE, FL 33313 City-St-Zip: City-St-Zip: SUNRISE, FL 33313

(X) Change () Addition Title: () Delete Title: RAMPERSAD, R. DEBORAH Name: RAMPERSAD, DEBORAH R Name: Address: 5900 NW 17TH PL 210 Address: 5900 NW 17TH PL #210 City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

Title: () Delete Title: SECR (X) Change () Addition MILLETARY, DONALD Name: CARFOUR, MADOCHEE Name:

5900 NW 17TH PL #202 5900 NW 17TH PL #103 Address: Address: City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

Title: () Delete Title: DIRE (X) Change () Addition

CARFOUR, MADOCHEE THOMPSON, KENDRA Name: Name: 5900 NW 17TH PL #103 5900 NW 17TH PL #207 Address: Address: City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

Title: () Delete Title: (X) Change () Addition

ROBINSON, LEANORAH CARR, CHARLES Name: Name: 5900 NW 17TH PL 212 5900 NW 17TH PL #112 Address: Address: City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

Title: (X) Delete Title: () Change () Addition

PINNOCK, ALWIN Name: Name: Address: 5900 NW 17TH PL #213 Address: SUNRISE, FL 33313 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DEBORAH R RAMPERSAD **TREA** 08/08/2005

Electronic Signature of Signing Officer or Director

Date