2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2006 8:00 am
Secretary of State
06-05-2006 90151 030 ****61.25

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1. Entity Name
LAKEVIEW GREENS CONDOMINIUM ASSOCIATION "A", INC.

50020821

Principal Place of Business	Mailing Address
~~3011~~ D LINTON BLVD DELRAY ~~BEACH~~, FL 33445	~~3011~~ D LINTON BLVD DELRAY ~~BEACH~~, FL 33445

05012006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
Integrity Property Mgmt	Integrity Property Mgmt
Suite, Apt. #, etc. 953 University Dr	Suite, Apt. #, etc. 953 University Dr.
City & State Coral Springs FL	City & State Coral Springs FL
Zip 33071 Country USA	Zip 33071 Country USA.

4. FEI Number 59-1725638 ☐ 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
INTEGRITY PROPERTY MANAGEMENT 953 UNIVERSITY DR. CORAL SPRINGS, FL 33071	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

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	D ROFF, MARTIN A 3011 LINTON BLVD. #D103 DELRAY BEACH, FL 33445	☒ Delete DEPARTN	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Michael SoKolor. 3011 Linton Blvd # D115 Delray Beach FL 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CHIFFER, EDWARD 1700 DOVER RD #A204 DELRAY BEACH, FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director ED Boneczyk. 3011 Linton Blvd # D201 Delray Beach FL 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BALVIN, HENRY 3001 LINTON BLVD. # C206 DELRAY BEACH, FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Mary Nelson. 3011 Linton Blvd # D105 Delray Beach FL 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUBSKY, MICHAEL 1700 DOVER ROAD #201 DELRAY BEACH, FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V. Pres. Thelma Knight. 3001 Linton Blvd # C201 Delray Beach FL 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LANGLAIS, ALBERT 1600 DOVER ROAD # B110 DELRAY BEACH, FL 33445	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P + Sec. Ethel Kadwell. 1600 Dover Rd # B112 Delray Beach FL 33445	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Gary Peterson. 1600 Dover Road # B216 Delray Beach FL 33445.	☐ Change ☒ Addition

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: T. A. Knight VP 5/18/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #