

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735426

FILED
Apr 29, 2009
Secretary of State

Entity Name: LAKEWOOD MID-RISE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

698 LAKESIDE BOULEVARD
BOCA RATON, FL 33434

New Principal Place of Business:

Current Mailing Address:

698 LAKESIDE BOULEVARD
BOCA RATON, FL 33434

New Mailing Address:

FEI Number: 59-1672003 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BACKER, KEITH
THE ARBOR, STE 420
400 SOUTH DIXIE HIGHWAY
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRUMAN, ALAN
Address: 7738 LAKE SIDE BLVD 365
City-St-Zip: BOCA RATON, FL 33434

Title: VP () Delete
Name: HERB, LEVINE
Address: 7754 LAKESIDE BLVD #432
City-St-Zip: BOCA RATON, FL 33434

Title: ST () Delete
Name: SALAMON, FREDA
Address: 7768 LAKESIDE BLVD, UNIT 533
City-St-Zip: BOCA RATON, FL

Title: D () Delete
Name: SPIEGLER, MARCEL
Address: 7819 LAKESIDE BLVD
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: LEWIS, MARTY
Address: 7786 LAKESIDE BLVD #644
City-St-Zip: BOCA RATON, FL 33434

Title: D () Delete
Name: SERVLON, STAN
Address: 7819 LAKESIDE BLVD #811
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PICKELL, GILDA
Address: 7754 LAKESIDE BLVD
City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALAN FRUMAN

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date