


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90216 027 ****70.00

DOCUMENT # 708887					
1. Entity Name LAKESHORE LODGE, INC.					
Principal Place of Business 298 SE SIXTH AVE POMPANO BEACH, FL 33060			Mailing Address 298 SE SIXTH AVE POMPANO BEACH, FL 33060		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1161196	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
STEFFEN, HERBERT 298 SE 6TH AVE #21 POMPANO BCH., FL 33060-4237			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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEFFEN, HERBERT		NAME	ANDERSEN, DAVID	
STREET ADDRESS	298 SE 6TH AVE #21		STREET ADDRESS	298 SE 6TH AVE #9	
CITY-ST-ZIP	POMPANO BEACH, FL 33060		CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	BLINCO, ELIZABETH D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DISPAS, NANNETTE		NAME		
STREET ADDRESS	298 SE 6TH AVENUE, #10		STREET ADDRESS	298 SE 6TH AVE #15	
CITY-ST-ZIP	POMPANO BEACH, FL 33060		CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEFFEN, PATRICIA		NAME	LEYMANN LINDA	
STREET ADDRESS	29+8 SE 6TH AVE #21		STREET ADDRESS	298 SE 6TH AVE #5	
CITY-ST-ZIP	POMPANO BEACH, FL 33060		CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARR, BOB		NAME		
STREET ADDRESS	298 SE 6TH AVE 316		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33060		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GASKO, ROBERT		NAME		
STREET ADDRESS	298 SE 6TH AVE #20		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33060		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHOUINARD, NICOLE		NAME		
STREET ADDRESS	298 SE 6TH AVENUE, #17		STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH, FL 33060		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: <i>Herbert Steffen</i> HERBERT STEFFEN			4-22-06		954 784-9537
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #

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