

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90168 025 ****61.25

DOCUMENT # 709183	
1. Entity Name	
LAKE COLONY APTS. TWO, INC.	



Principal Place of Business	Mailing Address
112-130 DOOLEN COURT NORTH PALM BEACH FL 33408	C/O COMPLETE PROP. MGMT 4239 NORTH LAKE BLVD., SUITE D PALM BEACH GARDENS FL 33410



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		33403	USA

1st MOORE CR2E037 (10/05)

4. FEI Number		Applied For
59-1113704		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
DICKER, KRIVOK, & STOLOFF PA 1818 AUSTRALIAN AVE SOUTH SUITE 400 WEST PALM BEACH FL 33407		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 _____
Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when resigning) DATE _____

FILE NOW: 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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D	TITLE	D
NAME	BAILEY, BOB	NAME	Nanda Cirullo
STREET ADDRESS	112 DOOLEN CT, #307F	STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	CITY-ST-ZIP	
TITLE	D	TITLE	D
NAME	ROMANO, TONY	NAME	David Warst
STREET ADDRESS	130 DOOLEN CT. #302 E	STREET ADDRESS	
CITY-ST-ZIP	N PALM BEACH FL 33408	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	GETMAN, KATHY	NAME	
STREET ADDRESS	130 DOOLEN CT, #304E	STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	CITY-ST-ZIP	
TITLE	VDS	TITLE	
NAME	VALENTI, SANDY	NAME	
STREET ADDRESS	112 DOOLEN COURT #103	STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	CITY-ST-ZIP	
TITLE	DP	TITLE	
NAME	STRAUB, CHUCK	NAME	
STREET ADDRESS	407 TENNESSEE DRIVE	STREET ADDRESS	
CITY-ST-ZIP	BRICK NJ 08723	CITY-ST-ZIP	
TITLE	DT	TITLE	
NAME	CARTER, MARY	NAME	
STREET ADDRESS	112 DOOLEN CT. #303 F	STREET ADDRESS	
CITY-ST-ZIP	NORTH PALM BEACH FL 33063	CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Mary C. Carter 4/27/06 801-6262728