

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709183

FILED
Apr 22, 2010
Secretary of State

Entity Name: LAKE COLONY APTS. TWO, INC.

Current Principal Place of Business:

112-130 DOOLEN COURT
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

COMPLETE PROPERTY MANAGEMENT, INC.
3307 NORTHLAKE BLVD., SUITE 107
PALM BEACH GARDENS, FL 33403

New Mailing Address:

FEI Number: 59-1113704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DICKER, KRIVOK, & STOLOFF PA
1818 AUSTRALIAN AVE SOUTH
SUITE 400
WEST PALM BEACH, FL 33407 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: D
Name: SANDY, VALENTI
Address: 112 DOOLEN CT, #F103
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: PD
Name: TROCCHIO, MATT
Address: 112 DOOLEN CT. #107F
City-St-Zip: N PALM BEACH, FL 33408

Title: D
Name: GETMAN, KATHY
Address: 130 DOOLEN CT, #304E
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: DT
Name: DAVIS, DENISE
Address: 112 DOOLEN CT, # 105F
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VPD
Name: HORAN, PATRICIA
Address: 130 DOOLEN COURT, D E306
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D
Name: CARTER, MARY
Address: 112 DOOLEN CT. #303 F
City-St-Zip: NORTH PALM BEACH, FL 33063

I hereby 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 all other like empowered.

SIGNATURE: MATT TROCCHIO

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04/22/2010

Electronic Signature of Signing Officer or Director

Date