

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90035 030 ****61.25

DOCUMENT # 716147

1. Entity Name
IMPROVEMENT ASSOCIATION OF LAKE ESTATES, INC.



Principal Place of Business
**2790 NE 57 CT.
FORT LAUDERDALE, FL 33308 US**

Mailing Address
**2790 NE 57 CT.
FORT LAUDERDALE, FL 33308 US**

50005395



03102006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2508975

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BIRD, LINDA
2790 NE 57 CT.
FORT LAUDERDALE, FL 33308**

7. Name and Address of New Registered Agent

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 title if applicable.

(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. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	TD	<input type="checkbox"/> Delete
NAME	VIRGA, JOYCE	
STREET ADDRESS	2801 NE 57 STREET	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308	
TITLE	VD	<input type="checkbox"/> Delete
NAME	LANE, GEORGE	
STREET ADDRESS	2790 NE 57 CT.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	ANDERSON, GEORGE	
STREET ADDRESS	2790 NE 57 CT.	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308	
TITLE	PD	<input type="checkbox"/> Delete
NAME	BIRD, LINDA W.	
STREET ADDRESS	2790 NE 57 COURT	
CITY-ST-ZIP	FORT LAUDERDALE, FL	
TITLE		<input type="checkbox"/> Delete
NAME	Valad, Max	
STREET ADDRESS	5761 Bayview Drive	
CITY-ST-ZIP	Fort Lauderdale, FL 33308	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Virga, Joyce	
STREET ADDRESS	2801 NE 57 ST	
CITY-ST-ZIP	Fort Lauderdale, FL 33308	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lane, George	
STREET ADDRESS	2791 NE 57 CT	
CITY-ST-ZIP	Fort Lauderdale, FL 33308	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Anderson, Bob	
STREET ADDRESS	2700 NE 57 CT	
CITY-ST-ZIP	Fort Lauderdale FL 33308	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Valad, Max	
STREET ADDRESS	5761 Bayview Dr.	
CITY-ST-ZIP	Fort Lauderdale	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: Linda W. Bird Linda W Bird 03/17/06 954 4918767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #