

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED
AND
FILED

95 MAY -1 PM 3:17

TALLAHASSEE, FLORIDA

500001477865
-05/08/95--01003--003
***130.00 ***130.00
DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 716830 (5)
1. Corporation Name
Lake Park Gardens #7, Inc., A Condominium

Principal Place of Business Mailing Address
4740 Northwest 10th Court
Plantation, FL 33313

2. Principal Place of Business 2a. Mailing Address
21 4740 NW 10th Court 26
Suite, Apt. #, etc.
22 City & State 27
23 Plantation 28
24 33313 25 Broward 29
Country 30

3. Date Incorporated or Qualified 3a. Date of Last Report
07/02/69 05/01/94
4. FEI Number Applied For
59-1317849 Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
Sunrae Management Services, Inc.
4000 North State Road 7
Suite 408
Lauderdale Lakes, FL 33319

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 Zip Code FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE: *KAREN BURCH* DATE: 4/16/95

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---------------------------------------|---|---|
| TITLE P | NAME Dewyer, Virginia | 11 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 4740 N.W. 10th Ct. #318 | CITY- ST- ZIP Plantation, FL 33313 | 12 NAME | |
| TITLE VP | NAME Nairn, Sonya | 13 STREET ADDRESS | |
| STREET ADDRESS 4740 N.W. 10th Ct. #116 | CITY- ST- ZIP Plantation, FL 33313 | 14 CITY- ST- ZIP | |
| TITLE S | NAME LeFrancois, Sylvia | 21 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 4740 N.W. 10th Ct. #304 | CITY- ST- ZIP Plantation, FL 33313 | 22 NAME | |
| TITLE T | NAME Murphy, John | 23 STREET ADDRESS | |
| STREET ADDRESS 4740 N.W. 10th Ct. #310 | CITY- ST- ZIP Plantation, FL 33313 | 24 CITY- ST- ZIP | |
| TITLE D | NAME Hartman, Mark | 31 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS 4740 N.W. 10th Ct. #104 | CITY- ST- ZIP Plantation, FL 33313 | 32 NAME | |
| TITLE D | NAME Boose, JoAnn | 33 STREET ADDRESS | |
| STREET ADDRESS 4740 N.W. 10 Ct. #302 | CITY- ST- ZIP Plantation, FL 33313 | 34 CITY- ST- ZIP | |
| | | 41 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | 42 NAME | |
| | | 43 STREET ADDRESS | |
| | | 44 CITY- ST- ZIP | |
| | | 51 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | 52 NAME | |
| | | 53 STREET ADDRESS | |
| | | 54 CITY- ST- ZIP | |
| | | 61 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | 62 NAME | |
| | | 63 STREET ADDRESS | |
| | | 64 CITY- ST- ZIP | |

14. I do hereby certify that the information furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Virginia Le Dewyer - President* DATE: 3/29/95 DISTRICT NO: 587-8363