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

DO NOT WRITE IN THIS SPACE

FILED Mar 14, 2006 08:00 AM **Secretary of State**

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1. Entity Name

LAKE PARK GARDENS #7, INC., A CONDOMINIUM



Principal Place of Business

Malling Address

2771 TREASURE COVE CIR

FT LAUDERDALE, FL 33312 US

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FT LAUDERDALE, FL 33312

US



02042006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 59-1317849

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BASS, MICHAEL R 600 S ANDREWS AVE 6TH FLOOR FT LAUDERDALE, FL 33301

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		for the purpose of changing its registered office or registered agent, or both, in the	e State of Florida. I am familiar with, and accept
do ens	ligations of registered agent.		}
SIGNATU	Signature, typed or printed name of registered agent	DATE	
1	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND	DIRECTORS	
TITLE NAME	PO JOHNSON RON		

STREET ADDRESS 4740 NW 10TH CT, #108 City-St-ZIP FT LAUDERDALE, FL 33313 TOTAL GORDON, ROWENA STREET ADDRESS 4740 NW 47TH PL #204 CITY-ST-ZIP FT LAUDERDALE, FL 33313 NAME KLEINER, NANCY STREET ADDRESS 4740 NW 10TH COURT City-St-702 FT LAUDERDALE, FL 33313 TITLE NAME BURGESS, JENNIFER STREET ADDRESS 4740 NW 10TH CT ART. 104 CITY-ST-ZIP FT LAUDERDALE, FL 33313 TITLE BOOSE, JO ANN STREET ADDRESS 4740 NW 10TH COURT CITY-SI-ZIP . FORT LAUDERDALE, FL 33313 TITLE NAME STREET ADDRESS CITY-ST-ZIP

H00000467285 03/23/06-90045-005-61.**25**

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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 eath; 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.

SIC	W	ATU	IR	E:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Daytyne Phone #