

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717667

FILED
Apr 22, 2009
Secretary of State

Entity Name: LAKE PARK GARDENS # 8, INC., A CONDOMINIUM

Current Principal Place of Business:

4760 NORTHWEST 10TH COURT
APT 202
PLANTATION, FL 33313

New Principal Place of Business:

6061 NW NORTH FALLS CIRCLE DRIVE
APT 311
LAUDERHILL, FL 33319

Current Mailing Address:

6061 NW NORTH FALLS CIRCLE DRIVE
APT 311
LAUDERHILL, FL 33319

New Mailing Address:

FEI Number: 59-1585169 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SMITH, LOYSTON
6061 NW NORTH FALLS CIRCLE DRIVE
APT 311
LAUDERHILL, FL 33319 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: DP () Delete
Name: SMITH, LOYSTON
Address: 4760 NORTHWEST 10TH CT, 202
City-St-Zip: PLANTATION, FL 33313

Title: BDS () Delete
Name: SMITH, TRACEY
Address: 4760 NORTHWEST 10TH CT, APT 204
City-St-Zip: PLANTATION, FL 33313

Title: DT () Delete
Name: KALBROOK SERVICES INC.
Address: 4760 NORTHWEST 10TH CT, APT 206
City-St-Zip: PLANTATION, FL 33313

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DT (X) Change () Addition
Name: SMITH, LOYSTON
Address: 4760 NORTHWEST 10TH CT, APT 202
City-St-Zip: PLANTATION, FL 33313

Title: D () Change (X) Addition
Name: BLAKE, WINSTON
Address: 4760 NORTHWEST 10TH CT.
City-St-Zip: PLANTATION, FL 33313

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LOYSTON SMITH

DP

04/22/2009

Electronic Signature of Signing Officer or Director

Date