

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90076 035 ****61.25

DOCUMENT # 725661 1. Entity Name LAKE SHORE TOWER TWO ASSOCIATION, INC.					
Principal Place of Business 121 COUNTRY CLUB DRIVE, A-901 LAKE PLACID, FL 33852			Mailing Address 121 COUNTRY CLUB DRIVE #901 LAKE PLACID, FL 33852		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1839945	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent PHILLIPS, ROBERT T 121 COUNTRY CLUB DR #502 LAKE PLACID, FL 33852			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			DATE		
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, 2007		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WINN, CLAUDIA 121 COUNTRY CLUB RD # 501 LAKE PLACID, FL 33852	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HALPIN, CLARE 121 COUNTRY CLUB DR. #702 LAKE PLACID, FL. 33852	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TERRY, KEITH 3260 SE 30TH TERRACE CAPE CORAL, FL 33904	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	KEITH, TERRY	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PHILLIPS, ROBERT 121 COUNTRY CLUB DRIVE #502 LAKE PLACID, FL 33852	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLOTO, ANGELO 121 COUNTRY CLUB DR # 203 LAKE PLACID, FL 33852	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MELVIN, GARY 121 COUNTRY CLUB DR. # 201 LAKE PLACID, FL. 33852	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLTS, RICHARD 121 COUNTRY CLUB DR #802 LAKE PLACID, FL 33852	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOHS, RICHARD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINN, JOHN 121 COUNTRY CLUB DR # 501 LAKE PLACID, FL 33852	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALPIN, PATRICK 121 COUNTRY CLUB DR. # 702 LAKE PLACID, FL. 33852	☐ Change ☒ Addition
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: Robert J. Phillips			4-20-07 863-465-9968		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		