## .2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT #726727**

1. Entity Name

LA AVENIDA DEL LAGO CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

1860 FOREST HILL BLVD.

STE 105

WPB, FL 33406 US

Mailing Address

1860 FOREST HILL BLVD.

STE 105

WPB, FL 33406 US



01032007 No Chg-NP

CR2E037 (4/06)

**FILED** 

Jan 29, 2007 08:00 AM Secretary of State

4. FEI Number 59-1670543

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRANTHAM, KIRK 1860 FOREST HILL BLVD SUITE 105 WEST PALM BEACH, FL 33406			DO NOT WRITE IN THIS SPACE				
	e named entity submits this statement for tions of registered agent.	the purpose of changing its regist	tered office or registered a	gent, or bo	th, in the State of I	Florida. I am familiar with, and acc	ер
SIGNATURE.	Signature, typed or printed name of registered agent a	red Agent signature required when reinstating) DATE					
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Fir Trust Fund Contribution			U0000 01/31/07	00607532 7-80042-003 61.25	
10.	OFFICERS AND D	DIRECTORS		<u> </u>		45	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GRANTHAM, KIRK 1860 FOREST HILL BLVD., STE. LAKE WORTH, FL 33460	105			. "		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOCKTON, JULIE 747 CONNESTEE RD. WEST PALM BEACH, FL 33413						
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D WOLFE, SHERRI 2622 FILLMORE ST HOLLYWOOD, FL 33020			DO	NOT V	VRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			; · · ·	IN .	THIS S	PACE	
TOLL							

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,

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP