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Mar 27 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 726776 (8)  
1. Corporation Name  
LAKEVIEW GREENS CONDOMINIUM ASSOCIATION "A", INC



Principal Place of Business Mailing Address  
3011-D LINTON BLVD 3011-D LINTON BLVD  
DELRAY BEACH FL 33445 DELRAY BEACH FL 33445-6505

3. Date Incorporated or Qualified 06/22/1973  
3a. Date of Last Report 05/01/1996

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 29 Country 30 Country

4. FEI Number 59-1725638 Applied For 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  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
KADWELL, ETHEL  
1600 DQVER RD  
#112B  
DELRAY BEACH FL 33445

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE D  DELETE  
NAME FRIESS, RICHARD  
STREET ADDRESS 3011-D LINTON BLVD  
CITY-ST-ZIP DELRAY BEACH FL 33445  
TITLE D  DELETE  
NAME HARMON, HAROLD Director  
STREET ADDRESS 3011 LINTON BLVD, APT. 116-D  
CITY-ST-ZIP DELRAY BEACH FL  
TITLE D  DELETE  
NAME BROWN, ROBERT President  
STREET ADDRESS 1600 DOVER ROAD, APT. 203-B  
CITY-ST-ZIP DELRAY BEACH FL  
TITLE D  DELETE  
NAME WOLF, SYLVIA Vice president  
STREET ADDRESS 3001 LINTON BLVD., #203  
CITY-ST-ZIP DELRAY BEACH FL  
TITLE D  DELETE  
NAME CHIFFER, EDWARD Director  
STREET ADDRESS 1700 DOVER ROAD, APT. 204-A  
CITY-ST-ZIP DELRAY BEACH FL  
TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  Change  Addition  
1.2 NAME Mack David  
1.3 STREET ADDRESS 1700 Dover Rd # 108  
1.4 CITY-ST-ZIP Delray Beach FL 33445 Director  
2.1 TITLE  Change  Addition  
2.2 NAME Joan Luthman  
2.3 STREET ADDRESS 3011 Linton Blvd 201A  
2.4 CITY-ST-ZIP Delray Beach FL 33445 Secretary  
3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  Change  Addition  
6.2 NAME ETHEL KADWELL  
6.3 STREET ADDRESS 1600 DOVER RD # 112B  
6.4 CITY-ST-ZIP Delray Beach FL 33445  
A Resumer

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ethel Kadwell *Ethel Kadwell* ETHEL KADWELL 3/10/97 496-7448  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0043271

CR2E037 (9/96)