

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90071 050 ****61.25

DOCUMENT # 726803

1. Entity Name
LIGHTHOUSE HARBOR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**2921 N.E. 28TH ST.
 LIGHTHOUSE POINT, FL 33064**

Mailing Address
**2921 N.E. 28TH ST.
 LIGHTHOUSE POINT, FL 33064**

50027651



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01072005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1595684

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BAMMAN, FRED III
 2189 SE. 9TH ST.
 POMPANO BEACH, FL 33062**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

**Filing Fee is \$61.25
 Due by May 1, 2005**

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: **DMBR** Delete
 NAME: **HOFMANN, DAVE**
 STREET ADDRESS: **2921 NE 28TH STREET, APT. 403**
 CITY-ST-ZIP: **LIGHTHOUSE POINT, FL 33064**

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: **DVP** Delete
 NAME: **BAMMAN, FRED C III**
 STREET ADDRESS: **2921 NE 28 STREET APT 203**
 CITY-ST-ZIP: **LIGHTHOUSE POINT, FL 33064**

TITLE: **LONA HARRIS PRESIDENT** Change Addition
 NAME: **LONA HARRIS**
 STREET ADDRESS: **2921 NE 28 ST 101**
 CITY-ST-ZIP: **LIGHTHOUSE PT, FL 33064**

TITLE: **T** Delete
 NAME: **MARINGOLD, ROSANNA**
 STREET ADDRESS: **2921 NE 28 ST., APT 205**
 CITY-ST-ZIP: **LIGHTHOUSE POINT, FL 33064**

TITLE: **TREASURER** Change Addition
 NAME: **CICELY WRIGHT**
 STREET ADDRESS: **2921 NE 28 ST 305**
 CITY-ST-ZIP: **LIGHTHOUSE PT, FL 33064**

TITLE: **S** Delete
 NAME: **O'NEILL, MARTIN**
 STREET ADDRESS: **2921 NE 28 ST APT 202**
 CITY-ST-ZIP: **LIGHTHOUSE POINT, FL 33064**

TITLE: **VICE PRESIDENT** Change Addition
 NAME: **JOSEPH NEWHOUSE**
 STREET ADDRESS: **2921 NE 28 ST 303**
 CITY-ST-ZIP: **LIGHTHOUSE PT, FL 33064**

TITLE: **P** Delete
 NAME: **ECKHOFF, EVE**
 STREET ADDRESS: **2921 NE 28 ST., APT 404**
 CITY-ST-ZIP: **LIGHTHOUSE POINT, FL 33064**

TITLE: **SECRETARY** Change Addition
 NAME: **EVE ECKHOFF**
 STREET ADDRESS: **2921 NE 28 ST 404**
 CITY-ST-ZIP: **LIGHTHOUSE POINT, FL 33064**

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

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

12. I 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 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:

EVE ECKHOFF

3/15/05

954-785-5521

SIGNATURE AND TYPED OR PRINTED NAME OF SECRETARY OR DIRECTOR

DATE

DAYTIME PHONE #