2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728261

FILED Jul 13, 2007 Secretary of State

Entity Name: LAKEWOOD ON THE GREEN PROPERTY ASSOCIATION, INC

	ME: LAKEWOOD ON THE GREEN PROPE	TT AGGGGIATION, INC.
Current Principal Place of Business:		New Principal Place of Business:
	EWOOD CIR. NORTH E, FL 33063 US	
Current M	failing Address:	New Mailing Address:
SUITE 2B	COMMERCIAL BLVD. C, FL 33319 US	5500 LAKEWOOD CIR. NORTH MARGATE, FL 3363 US
In accordan	r: 59-1536385 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation did no	·
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
%SURRAE MANAGEMENT SERVICES 7071 W. COMMERCIAL BLVD. SUITE 2B TAMARAC, FL 33319 US		AGRAMONTE, ROBERT 5500 LAKEWOOD CIRCLE MARGATE, FL 33063 US
	e named entity submits this statement for the pe of Florida.	ourpose of changing its registered office or registered agent, or both
SIGNATU	RE: ROBERT AGRAMONTE	07/13/2007
	Electronic Signature of Registered Age	ent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	PD () Delete AGRAMONTE, ROBERT 5568 G LAKEWOOD CIRCLE MARGATE, FL 33063	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	VD () Delete GAVIN, THOMAS 5442 E LAKEWOOD CIRCLE MARGATE, FL 33063	Title: D (X) Change () Addition Name: MONICA, PAYAN Address: 5470-F LAKEWOOD CIRCLE City-St-Zip: MARGATE, FL 33063
Title: Name: Address: City-St-Zip:	T () Delete MCCLURE, JOE 5586 - A LAKEWOOD CIRCLE MARGATE, FL 33063	Title: () Change () Addition Name: Address: City-St-Zip:
Title:	D () Delete GLAZER, MARTIN	Title: VD (X) Change () Addition Name: GLAZER, MARTIN Address: 5426 A LAKEWOOD CIRCLE
Name: Address: City-St-Zip:	5426 A LAKEWOOD CIRCLE MARGATE, FL 33063	City-St-Zip: MARGATE, FL 33063

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: ROBERT AGRAMONTE PD 07/13/2007