

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90101 036 ****70.00

DOCUMENT # 729222 1. Entity Name LAKE HARBOUR TOWERS EAST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 801 LAKE SHORE DRIVE LAKE PARK, FL 33403			Mailing Address 801 LAKE SHORE DRIVE 115 LAKE PARK, FL 33403		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01042007 Chg-NP CR2E037 (12/06)	
4. FEI Number 59-1537805				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOLL, JO ANN 801 LAKE SHORE DR #516 WEST PALM BEACH, FL 33403			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City LAKE PARK FL Zip Code 33403		
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 _____ 2-13-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D	<input type="checkbox"/> Delete	TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DOLL, JO-ANN		NAME	DOLL JO-ANN	
STREET ADDRESS	801 LAKESHORE DR #516		STREET ADDRESS	801 LAKESHORE DR #516	
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP	LAKE PARK FL 33403	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	V PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	GERSON, GEORGE		NAME	SAM GABRIEL	
STREET ADDRESS	801 LAKESHORE DR #210		STREET ADDRESS	801 LAKESHORE DR #108	
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP	LAKE PARK FL 33403	
TITLE	D	<input type="checkbox"/> Delete	TITLE	TREASURER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PARKER, EVELYN		NAME	JOAN KNAPP	
STREET ADDRESS	801 LAKESHORE DR #506		STREET ADDRESS	801 LAKESHORE DR #203	
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP	LAKE PARK FL 33403	
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MITCHELL, JOHN		NAME	RICHARD FEELEY	
STREET ADDRESS	801 LAKESHORE DR #805		STREET ADDRESS	801 LAKESHORE DR #804	
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP	LAKE PARK FL 33403	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	ADD DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	LOWERY, PETER		NAME	JUNE FESTA	
STREET ADDRESS	801 LAKE SHORE DR #406		STREET ADDRESS	801 LAKESHORE DR #	
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP	LAKE PARK FL 33403	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PILZ, MARILYN		NAME	MICHAEL HUGHES	
STREET ADDRESS	801 LAKE SHORE DR, # 801		STREET ADDRESS	801 LAKESHORE DR #70	
CITY-ST-ZIP	LAKE PARK, FL 33403		CITY-ST-ZIP	LAKE PARK 33403	
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: <i>J. Ann Doll</i>			2-13-07		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		