

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739495

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE GARDENS OF LAKEWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O LANG MANAGEMENT
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

C/O LANG MANAGEMENT
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 59-1808048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ISAACSON, WILLIAM K
21045 COMMERCIAL TRAIL
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GOLDBERG, CAROL
Address: 7770 LAKESIDE BLVD, G-303
City-St-Zip: BOCA RATON, FL

Title: DP () Delete
Name: KRISKY, ROBERT
Address: 7736 LAKESIDE BL G 207
City-St-Zip: BOCA RATON, FL

Title: TD () Delete
Name: MOLL, RICHARD
Address: 7710 LAKESIDE BLVD G-105
City-St-Zip: BOCA RATON, FL 33434

Title: DS () Delete
Name: GREENMAN, MAURICE
Address: 7804 LAKE SIDE BLVD., G405
City-St-Zip: BOCA RATON, FL 33434

Title: VP () Delete
Name: POLLACK, JOEL
Address: 7770 LAKESIDE BLVD., G-302
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 KRISKY

DP

04/17/2009

Electronic Signature of Signing Officer or Director

Date