

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999

DOCUMENT # 739886

1. Corporation Name

LAGO DEL REY CONDOMINIUM, INC. 1

Principal Place of Busines
2737 ZORND WAY DELRAY BCH FL 33445 US

Suite, Apt. #, etc.

City & State

2. Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

ASSOCIATION MANAGEMENT GROUP 7187 THOMPSON RD LANTANA FL 33462

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FILED Mar 11, 1999 8:00 am § Secretary of State

03-11-1999 90245 011 ****61.25

	,	

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

08/11/1977

59-1790584

FEI Number

23		28				ļ					
Zip	Country	Zip	Cou			6. Election Cam			•	May Be	
24	25	29 .	30			Trust Fund Contribution Added to Fees					
	 Name and Address of Current I 			10. Name and A	ddress of New R	egistered A	gent				
				81	Name						
HUCKABY	. JANET	82	Street Addre	ss (P.O. Box Numb	er is Not Accepta	ble)					
7187 THOMPSON RD						·					
LANTANA FL 33462							•				
				84	City				85 Zip	Code	
				-	•			<u> </u>			
office or re	to the provisions of Sections 617.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida, Such chance	oe was authoriz	ea by	tne corporatioi	oration submits this n's board of director	statement for the rs. I hereby accep	purpose of o t the appoin	changing its tment as re	s registered egistered	
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable.	(NOTE: Registe	red Agen	t signature required	when reinstating)		DATE			
12.	OFFICERS AND		1:	3.		ADDITIONS/C	HANGES TO OF	ICERS AN			
TITLE	PD	□ DE	LETE 1.1	TITLE					Change	Addition	
NAME	rackmeyer, george		1.2	NAME							
STREET ADDRESS	2725 ZORNO WAY		1.3	STREET	ADDRESS						
CITY-ST-ZIP	DELRAY BCH FL 33445			CITY-S	r-zip						
TITLE	VD	□ DE	LETE 2.1	TITLE					Change	☐ Addition	
NAME	WOLFF, SHIRLEY		2.2	NAME							
STREET ADDRESS	2741 ZORNO WAY		2.3	STREET	ADDRESS		•				
CITY-ST-ZIP	DELRAY BCH FL 33445			4 CITY-S	T-ZIP		<u> </u>				
TITLE	TD	☐ DE	ELETE 3.1	TITLE	1				☐ Change	☐ Addition	
NAME	HUTTON, FANNIE		3.2	NAME							
STREET ADDRESS	2709 ZORNO WAY		3.3	STREET	ADORESS		•				
CITY-ST-ZIP	DELRAY BEACH FL 33445			. CITY-S	T-ZIP			*	==	T Addres	
TITLE	D	☐ DE	ELETE 4.1	TITLE			•		☐ Change	☐ Addition	
NAME	WOLOVITS, ELIZABETH		4.	2 NAME							
STREET ADDRESS	2713 ZORNO WAY		4.3	STREET	ADDRESS				,	•	
CITY-ST-ZIP	DELRAY BEACH FL 33445			CITY-S	r-zip				= 4		
TITLE	SD	☐ D6	1 -	TITLE					Change	Addition	
NAME	LESSELBAUM, NATALIE			NAME						-	
STREET ADDRESS	2701 ZORNO WAY		5.3	STREET	FADDRESS						
CITY-ST-ZIP	DELRAY BCH FL 33445			CITY-S	T-ZIP				· · ·		
TITLE		□ Di	ELETE 6.1	ΠΊLE					Change	☐ Addition	
NAME			6.3	NAME			-		•		
STREET ADDRESS			6.3	STREE	T ADDRESS						
CODY OT 710	Í		6.4	CITY-S	Y-ZIP						

14. 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 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, with all other like empowered.

SIGNATURE:

Applied For

\$8.75 Additional

Fee Required

Not Applicable