

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 739886

1. Entity Name
LAGO DEL REY CONDOMINIUM, INC. 1

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90009 003 ****61.25

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

Mailing Address
ASSOCIATION MANAGEMENT GROUP
7187 THOMPSON RD
~~LANTANA FL 33462~~
US **Boynton Beach**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, **Association Management Group**
7187 Thompson Road
City & State
Boynton Beach, FL 33426
Zip

4. FEI Number
59-1790584

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
HUCKABY, JANET
7187 THOMPSON RD
~~**LANTANA FL 33462**~~
Boynton Beach, FL 33426

7. Name and Address of New Registered Agent
Name **HUCKABY, JANET**
Street Address (P.O. Box Number is Not Acceptable)
46 Association Management Group
7187 Thompson Road
City **Boynton Beach, FL 33426FL** 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.

SIGNATURE *Janet Huckaby* (NOTE: Registered Agent signature required when reinstating) DATE **2-15-00**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete
NAME	RACKMEYER, GEORGE
STREET ADDRESS	2725 ZORNO WAY
CITY-ST-ZIP	DELRAY BCH FL 33445
TITLE	VD <input checked="" type="checkbox"/> Delete
NAME	WOLFF, SHIRLEY
STREET ADDRESS	2741 ZORNO WAY
CITY-ST-ZIP	DELRAY BCH FL 33445
TITLE	TD <input checked="" type="checkbox"/> Delete
NAME	HUTTON, FANNIE
STREET ADDRESS	2709 ZORNO WAY
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	D <input type="checkbox"/> Delete
NAME	WOLOVITS, ELIZABETH
STREET ADDRESS	2713 ZORNO WAY
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	SD <input checked="" type="checkbox"/> Delete
NAME	LESSELBAUM, NATALIE
STREET ADDRESS	2701 ZORNO WAY
CITY-ST-ZIP	DELRAY BCH FL 33445
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Percival, Fran
STREET ADDRESS	2737 ZORNO WAY
CITY-ST-ZIP	DELRAY BEACH, FL 33445
TITLE	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ZELLER, STAN
STREET ADDRESS	2605 ZORNO WAY
CITY-ST-ZIP	DELRAY BEACH, FL 33445
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALBERT, Pearl
STREET ADDRESS	2609 ZORNO WAY
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *[Signature]* DATE: **2-15-00**

CR2E037 (9/99)