## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#739886** 

FILED Mar 08, 2007 Secretary of State

Entity Name: LAGO DEL REY CONDOMINIUM, INC. 1

**Current Principal Place of Business: New Principal Place of Business:** PALM BEACH PROPERTY MGT 2200 N. FEDERAL HWY #212 BOCA RATON, FL 33431 **New Mailing Address: Current Mailing Address:** PALM BEACH PROPERTY MGT. 2200 N. FEDERAL HWY #212 BOCA RATON, FL 33431 FEI Number: 59-1790584 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PLAZURE, LENNIE 2200 N. FÉDERAL HWY BOCA RATON,, FL 33431 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DEBRA, WEAVER Name: Name: 421 HOMEWOOD BLVD Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete Name: NAHMAN, JACK Name: GAUDIO, VINCENT Address: 2625 ZORNO WAY Address: 2709 ZORNO WAY City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33445 Title: STD () Delete Title: () Change () Addition JONES, BRENDA Name: Name: Address: 2745 ZORNO WAY Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: SCHAFFER, SHANNON Name: Address: 2705 ZORNO WAY Address: City-St-Zip: DELRAY BEACH, FL 33445 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBORAH WEAVER Ρ 03/08/2007