

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739887

FILED  
Apr 10, 2006  
Secretary of State

Entity Name: LAGO DEL REY CONDOMINIUM, INC. 5

## Current Principal Place of Business:

2200 N. FEDERAL HIGHWAY  
SUITE 212  
BOCA RATON,, FL 33431 US

## New Principal Place of Business:

## Current Mailing Address:

PALM BEACH PROPERTY MANAGEMENT  
2200 NORTH FEDERAL HIGHWAY SUITE 212  
BOCA RATON, FL 33431 US

## New Mailing Address:

FEI Number: 59-1790588      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PLAZURE, LENNIE MR.  
2200 N. FEDERAL HWY.  
SUITE 212  
BOCA RATON, FL 33431 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: PD ( ) Delete  
Name: SKRECK, ROBERT MR.  
Address: 2929 ZORNO WAY #107A  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: D ( ) Delete  
Name: KRANACK, RHONDA MS.  
Address: 2700 CASITA WAY , 103A  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: SD ( ) Delete  
Name: KELLNER, ALISA  
Address: 2828 CASITA WAY #106  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D ( ) Delete  
Name: DONATH, HELGA  
Address: 2828 CASITA WAY #104  
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPD ( ) Delete  
Name: ADAMS, ROBERT MR.  
Address: 2700 CASITA WAY 104A  
City-St-Zip: DEL RAY BEACH, FL 33445 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: REDMOND, MICHAEL  
Address: 2828 CASITA WAY , 204A  
City-St-Zip: DELRAY BEACH, FL 33445 US

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 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 SKRECK

P

04/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date