2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2007
Secretary of State

DOCUMENT# 739887

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: REDMOND, MICHAEL
Address: 2828 CASITA WAY , 204A
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: ( ) 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 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 SKRECZ P 03/08/2007

Electronic Signature of Signing Officer or Director — Date