


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 15, 2007 8:00 am**  
**Secretary of State**

02-15-2007 90054 038 \*\*\*\*\*70.00

<b>DOCUMENT # 742551</b>	
1. Entity Name <b>LAKE OF SHERBROOKE HOME OWNERS ASSOCIATION, INC.</b>	

Principal Place of Business <b>8130 HAVASU COURT LAKE WORTH FL 33467</b>	Mailing Address <b>8130 HAVASU COURT LAKE WORTH FL 33467</b>
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/06)

City & State	City & State
Zip	Country

4. FEI Number <b>59-2032573</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent  <b>DICKER, ED 1818 AUSTRALIAN AVE. SO. STE. 400 WEST PALM BEACH FL 33409</b>	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY- ST- ZIP		CITY- ST- ZIP	
<b>T</b>		<b>VP</b>	
<b>VACCA, WILLIAM</b>		<b>SIDNEY LIPSON</b>	
<b>5534 EGRET ISLE TR</b>		<b>8719 GRASSY ISLE TR.</b>	
<b>LAKE WORTH FL 33467</b>		<b>LAKE WORTH, FL 33467</b>	
<b>VP</b>		<b>S</b>	
<b>FERRI, MARC</b>		<b>JOSEPH GUASTELLA</b>	
<b>8130 HAVASU CT</b>		<b>8508 BONITA ISLE DR</b>	
<b>LAKE WORTH FL 33467</b>		<b>LAKE WORTH, FL 33467</b>	
<b>VP</b>		<b>D</b>	
<b>GUASTELLA, JOSEPH</b>		<b>EDMOND SARFATY</b>	
<b>8508 BONITA ISLE DR</b>		<b>5520 EGRET ISLE TRAIL</b>	
<b>LAKE WORTH FL 33467</b>		<b>LAKE WORTH, FL 33467</b>	
<b>D</b>		<b>D</b>	
<b>GULINO, HEIDI</b>		<b>JACK CHERNACK</b>	
<b>8501 BONITA ISLE DR</b>		<b>5194 CANDLEWOOD CT.</b>	
<b>LAKE WORTH FL 33467</b>		<b>LAKE WORTH, FL 33467</b>	
<b>D</b>			
<b>FLOWERS, WILLIAM</b>			
<b>8130 HAVASU CT</b>			
<b>LAKE WORTH FL 33467</b>			
<b>P</b>			
<b>SERRA, VICTOR</b>			
<b>8605 BONITA ISLE DR</b>			
<b>LAKE WORTH FL 33467</b>			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Victor Serra 2/6/07 (561) 968-6610