

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 18, 2003 8:00 am
Secretary of State

03-18-2003 90061 028 ****70.00

DOCUMENT # 744444



1. Entity Name
THE GARDENS OF LAKEWOOD III CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
**21045 COMMERCIAL TRAIL
BOCA RATON FL 33486**

Mailing Address
**21045 COMMERCIAL TRAIL
BOCA RATON FL 33486**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1890741**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LANG MGMT CO
5295 TOWN CENTER RD
#200
BOCA RATON FL 33496**

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 reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** Delete
NAME **KANE, MARVIN**
STREET ADDRESS **7747 LAKESIDE BLVD., G18-2**
CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** Delete
NAME **KESSNER, FRANCES M**
STREET ADDRESS **7709 LAKESIDE BLVD 17-3**
CITY-ST-ZIP **BOCA RATON FL**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** Delete
NAME **WITKIN, STAN**
STREET ADDRESS **7809 LAKESIDE BLVD 6204**
CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** Delete
NAME **LENER, NORMAN**
STREET ADDRESS **7671 LAKESIDE BLVD. G 16-5**
CITY-ST-ZIP **BOCA RATON FL**

TITLE Change Addition
NAME **SUSAN Kolben**
STREET ADDRESS **7671 Lakeside Blvd - G 16-4**
CITY-ST-ZIP **Boca Raton, FL 33434**

TITLE **D** Delete
NAME **CALMAN, HARRIET**
STREET ADDRESS **7773 LAKESIDE BLVD 1902**
CITY-ST-ZIP **BOCA RATON FL 33434**

TITLE Change Addition
NAME **Gary Roberts**
STREET ADDRESS **7809 Lakeside Blvd - G 208**
CITY-ST-ZIP **Boca Raton, FL 33434**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change 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: *Frances M Kessner*

March 4/03

CR2E037 (10/02)