


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 20, 2008 8:00 am
Secretary of State

05-20-2008 90006 023 ****61.25

DOCUMENT # 753551 1. Entity Name LAGO LUCERNE HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business 4000 AUGUST DR LAKE WORTH, FL 33461	Mailing Address 4000 AUGUST DR LAKE WORTH, FL 33461
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DO NOT WRITE IN THIS SPACE

04292008 No Chg-NP CR2E037 (4/06)

4. FEI Number 34-1337856	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent STRASSBERGER, ROBERT 3935 AUGUST DR. LAKE WORTH, FL 33461
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**DO NOT WRITE
IN THIS SPACE**

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 *ROBERT STRASSBERGER* *Robert P. Strassberger* *28 APR 2008*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NEWTON, RICHARD 3885 LOUIS DR. LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD STRASSBERGER, ROBERT 3935 AUGUST DR LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD CHERRY, ROBERT 3919 CAROLINA DR LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SARGENT, DONALD 3971 AUGUST DR. LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SWIENTON, JOSEPH 3959 AUGUST DR LAKE WORTH, FL 33461
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD DIEFFENBACH, STACEY 3595 CAROLINA DR LAKE WORTH, FL 33461

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *ROBERT P. STRASSBERGER* *Robert P. Strassberger* *28 APR 2008* *(561) 582-5575*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

SEE ATTACHED

DOCUMENT # 75355 ATTACHMENT

LAGO LUCERNE HOMEOWNERS ASSOCIATION,
INC.

40104403

ATTACHMENT

(ADDITIONAL DIRECTOR)

KOENIG, ALLAN

3899 CAROLINA DR

LAKE WORTH, FL 33461