

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 18 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONSDOCUMENT # 756151 (7)  
1. Corporation Name  
LAKEVIEW SQUARE CONDOMINIUM ASSOCIATION, INC.

## Principal Place of Business

% DENTON W. CROCKETT, JR.  
1020 LAKEVIEW ROAD, SUITE 200  
CLEARWATER FL 34616-3478

## Mailing Address

% DENTON W. CROCKETT, JR.  
1020 LAKEVIEW ROAD, SUITE 200  
CLEARWATER FL 34616-34233. Date Incorporated or Qualified  
02/02/19813a. Date of Last Report  
02/27/1996

## 2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip Country

24 25

## 2a. Mailing Address

26 11175 Starkey Road

Suite, Apt. #, etc.

27 City & State  
28 Largo, Florida29 Zip Country  
30 33773 USA

## 4. FEI Number

59-2072111

## Applied For

Not Applicable

## 5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

## 6. Election Campaign Financing

Trust Fund Contribution

☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

## 9. Name and Address of Current Registered Agent

## 10. Name and Address of New Registered Agent

CROCKETT, DENTON W., JR.  
1020 LAKEVIEW ROAD  
SUITE 200  
CLEARWATER FL 33516

## 81 Name

## 82 Street Address (P.O. Box Number is Not Acceptable)

11175 Starkey Road

## 83

## 84 City

Largo

FL

85 Zip Code  
33773

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

## SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

## 12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETENAME CROCKETT, DENTON W., JR.  
STREET ADDRESS 1020 LAKEVIEW ROAD  
CITY-ST-ZIP CLEARWATER FLTITLE VD ☐ DELETENAME BOLLENBACK, GEORGE W.  
STREET ADDRESS 1020 LAKEVIEW ROAD  
CITY-ST-ZIP CLEARWATER FLTITLE STD ☐ DELETENAME FORRET, PETER B.  
STREET ADDRESS 1020 LAKEVIEW ROAD  
CITY-ST-ZIP CLEARWATER FLTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY-ST-ZIP

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

11175 Starkey Road  
Largo, FL 33773

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

1006 Pinellas Street  
Clearwater, FL 34616

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

1006 Pinellas Street  
Clearwater, FL 34616

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Denton W. Crockett, Jr., President  
SIGNATURE: REQUIRED

2/10/97

(813) 394-6453

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0066939

CR2E037 (9/96)