


2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Sep 01, 2005 8:00 am
Secretary of State

09-01-2005 90024 002 ****70.00

DOCUMENT # 756151 1. Entity 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 C/O DENTON W. CROCKETT, JR 11175 STARKEY ROAD LARGO, FL 33773-4821 US		
2. Principal Place of Business 1020 Lakeview Road		3. Mailing Address c/o: Antonina Foti			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 210 Route 40			
City & State Clearwater, Florida		City & State Carney's Point, New Jersey		4. FEI Number 59-2072111	
Zip 33756		Country U.S.A.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33756		Country U.S.A.		6. Name and Address of Current Registered Agent CROCKETT, DENTON W., JR. 11175 STARKEY ROAD LARGO, FL 33773-4821	
Suite, Apt. #, etc. 		7. Name and Address of New Registered Agent Name Rudolph M. Di Lascio, Jr., Esquire Street Address (P.O. Box Number is Not Acceptable) 5798 Johnson Street City Hollywood, FL Zip Code 33021			
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 Rudolph M. Di Lascio, Jr. DATE 08/22/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)</small>					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME STREET ADDRESS CITY-ST-ZIP	PD CROCKETT, DENTON W., JR. 11175 STARKEY ROAD LARGO, FL 337734821	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Antonina Foti 210 Route 40 Carney's Point, New Jersey 08069	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOLLENBACK, GEORGE W. 1000 PINELLAS STREET CLEARWATER, FL 33756	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Gaetano Foti 210 Route 40 Carney's Point, New Jersey 08069	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FORRET, PETER B. 1000 PINELLAS STREET CLEARWATER, FL 33756	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Antonina Foti</i>			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Antonina Foti,		
Date 08/22/05			Daytime Phone # (856) 299-1571		

50064470



ATTACHMENT

50064420
756151

LAW OFFICE OF

RUDOLPH M. DI LASCIO, JR., P.A.

5798 JOHNSON STREET
HOLLYWOOD, FLORIDA 33021

TELEPHONE: (954) 966-7466
FACSIMILE: (954) 966-3410

August 30, 2005

Division of Corporations
2670 Executive Center Circle, Suite 100
Tallahassee, Florida 32301

Re: 2005 Annual Report
Lakeview Square Condominium Association, Inc.

Gentlemen:

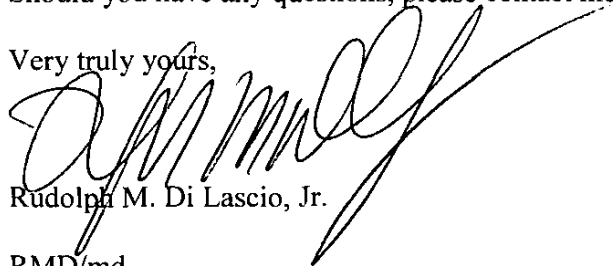
I have enclosed the following regarding the above referenced matter:

1. 2005 Not-For-Profit Corporation Annual Report
2. Office check in the amount of \$70.00 representing the filing fee and a Certificate of Status

Please send the Certificate of Status to the office of the undersigned.

Should you have any questions, please contact me.

Very truly yours,



Rudolph M. Di Lascio, Jr.

RMD/md
Enclosures

Sent Via UPS-2 Day