2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 761156

1. Entity Name
PARCEL 310 LAKE AND DRAINAGE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8080 NW 10TH COURT	8080 NW 10TH COURT
PLANTATION, FL 33322	PLANTATION, FL 33322

DO NOT WRITE IN THIS SPACE

08212006 No Chg-NP   CR2E037 (4/06)

4. FEI Number	Applied For
59-2370121	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SURFACE, SANDY
8080 NW 10 CT
PLANTATION, FL 33322

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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

Filing Fee is $61.25
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PST
NAME	SURFACE, SANDY
STREET ADDRESS	8080 NW 10 CT
CITY-ST-ZIP	PLANTATION, FL 33322

TITLE	D
NAME	DUPONT, LISA
STREET ADDRESS	8080 NW 10 CT
CITY-ST-ZIP	PLANTATION, FL 33322

TITLE	D
NAME	SURFACE, SANDY
STREET ADDRESS	8080 NW 10 CT
CITY-ST-ZIP	PLANTATION, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/24/06-80003-003 61.25

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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: _____   8.21.06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #