2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761297

FILED Mar 31, 2005 Secretary of State

Entity Name: LAKE FOREST SOUTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
PO BOX 77 DELRAY BI	'11 EACH, FL 33482	US				
Current Mailing Address:			New Mailir	New Mailing Address:		
PO BOX 77 DELRAY BI	'11 EACH, FL 33482	US				
FEI Number:	65-0068957 F	El Number Applied For()	FEI Number Not Appli	icable () Certificate of Status Desired ()		
Name and	Address of Curr	ent Registered Agent:	Name and	Address of New Registered Agent:		
1818 AUST SUITE 400 WEST PAL	RIVOK & STOLO RALIAN AVE SO M BEACH, FL 3	UTH 3409 US				
The above in the State		mits this statement for the p	urpose of changing it	ts registered office or registered agent, or both,		
SIGNATUR						
	Electronic S	Signature of Registered Age	nt	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	TD () Del FARNHILL, PHILIP PO BOX 7711 DELRAY BEACH, F		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PD () Del DONAHUE, RICK PO BOX 7711 DELRAY BEACH, F		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SD () Del FARNHILL, DORI PO BOX 7711 DELRAY BEACH, F		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () Del MAGI, MICHAEL PO BOX 7711 DELRAY BEACH, F		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	D () Del BROWN, SKIP PO BOX 7711 DELRAY BCH, FL		Title: Name: Address: City-St-Zip:	D (X) Change () Addition BROWN, ART PO BOX 7711 DELRAY BCH, FL 33482 US		
Title: Name: Address: City-St-Zip:	D () Del GUTTUSO, JOHN PO BOX 7711 DELRAY BEACH, F		Title: Name: Address: City-St-Zip:	()Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP FARNHILL TD 03/31/2005