


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 8:00 am
Secretary of State

01-07-2008 90038 015 ****61.25

DOCUMENT # 768475 1. Entity Name LAKE BREEZE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2401 LAKE DR RIVIERA BEACH, FL 33404 US			Mailing Address 2401 LAKE DR #1 RIVIERA BEACH WEST PALM BEACH, FL 33404 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2393025	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GRIFFIN, LAWRENCE C. 2001 BROADWAY, 6TH FL. RIVIERA BEACH, FL 33404				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
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	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	Hutchins Thomas T.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUTCHINS, THOMAS T.		NAME	2401 Lake Dr #1	
STREET ADDRESS	30 JOSIAS LANE		STREET ADDRESS	Riviera Beach, FL 33404	
CITY-ST-ZIP	OGUNQUIT, ME		CITY-ST-ZIP		
TITLE	STD	<input type="checkbox"/> Delete	TITLE	Hutchins, Elizabeth	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUTCHINS, ELIZABETH		NAME	2401 Lake Dr #1	
STREET ADDRESS	30 JOSIAS LANE		STREET ADDRESS	Riviera Beach, FL 33404	
CITY-ST-ZIP	OGUNQUIT, ME 03907		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	Constantine, Mary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONGTANTINE, MARY		NAME	2401 Lake Dr #5	
STREET ADDRESS	2401 LAKE DR.		STREET ADDRESS	Riviera Beach, FL 33404	
CITY-ST-ZIP	RIVIERA BEACH, FL 33404		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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 <i>Elizabeth W. Hutchins</i> SECRETARY <i>Elizabeth W. Hutchins</i> 01/05/08 561-844-5302					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					