2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2006 8:00 am
Secretary of State
03-21-2006 90047 030 ****61.25

DOCUMENT # 770406

1. Entity Name

THE LAKES OF SARASOTA CONDOMINIUM ONE ASSOCIATION, INC.

66007750

1st MOORE CR2E037 (10/05)

Principal Place of Business	Mailing Address
2477 STICKNEY POINT RD #118A SARASOTA FL 34231 US	2477 STICKNEY POINT RD #118A SARASOTA FL 34231 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2502644 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Argus Property Management 2477 Stickney Point Rd #118A Sarasota, FL 34231	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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	P KOHR, NAN 4367 TRAILS DR SARASOTA FL 34232	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KATHRYN COOPER 1233 Cottonwood Tr. Sarasota, FL 34232	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP KOHR, ROBERT 4367 TRAILS DR SARASOTA FL 34232	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MICHAEL LANDO 4360 TRAILS DR SARASOTA, FL 34232	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT LEUNG, MARLA 4330 TRAILS DR SARASOTA FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS RUNKELWITZ, CATHERINE 4370 TRAILS DR SARASOTA FL 34232	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS DAVID D'AMICO 4372 TRAILS DR SARASOTA, FL 32423	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRIFFIN, SHIRLEY 4387 TRAILS DR SARASOTA FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Kathryn Cooper 2/1/06 941-320-8075
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #