### 2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DO NOT WRITE IN THIS SPACE

#### DOCUMENT # A20855

LAKÉVIEW 436 ASSOCIATES LTD.



Principal Place of Business

2295 CORPORATE BOULEVARD, N.W.

SUITE 222

BOCA RATON, FL 33431

Mailing Address

2295 CORPORATE BOULEVARD, N.W.

SUITE 222

BOCA RATON, FL 33431

# FILED

2007 MAR 19 PM 3:38

SECRETARY OF STATE TALLAHASSEE.FLORIDA



01092007 No Chg-LP

CR2E003 (12/06)

4. FEI Number

59-2612728

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERRICK, NORTON 2295 CORPORATE BOULEVARD **SUITE 222** BOCA RATON, FL

## DO NOT WRITE IN THIS SPACE

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

DATE

#### FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

STAPLE CHECK HERE	12.	GENERAL PARTNER INFORMATION
	DOCUMENT#	A28801
	NAME	LAKEVIEW-NORT, LTD.
	STREET ADDRESS	2295 CORPORATE BLVD #222
	CITY-ST-ZIP	BOCA RATON, FL 33431
	DOCUMENT #	
	NAME	
	STREET ADDRESS	
	CITY-ST-ZIP	
	DOCUMENT #	
	NAME	
	STREET ADDRESS	
	CITY-ST-ZIP	
	DOCUMENT #	
	NAME	
	STREET ADDRESS	
	CITY-ST-ZIP	
	DOCUMENT #	
	NAME	
	STREET ADDRESS	
	CITY-ST-ZIP	
	DOCUMENT #	
	NAME	
	STREET ADDRESS	
	CITY-ST-ZIP	

**600094860486** 03/27/07--01033--022 \*\*508.75

## DO NOT WRITE IN THIS SPACE

14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee ampowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

ontroller of GP

2/20