

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # N02000009926

1. Entity Name
LAKE PARK RECREATION ASSOCIATION, INC.



Principal Place of Business
**772 U.S. HIGHWAY ONE
200
NORTH PALM BEACH, FL 33408**

Mailing Address
**1451 FLAGLER BLVD.
LAKE PARK, FL 33403**



03152006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **54-2089234** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**NEWMAN, HOWARD P
772 U.S. HIGHWAY ONE
200
NORTH PALM BEACH, FL 33403**

**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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$81.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOSTROM, BERTIE 1451 FLAGLER BLVD. LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MONROE, DIANE 722 HAWTHORNE DRIVE LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CATASUS, CRISTINA 102 6TH ST. APT. 2 LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JACKSON, GARY M 1210 GATEWAY RD LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000524883
05/04/06-80007-017 61.25

**DO NOT WRITE
IN THIS SPACE**

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: Bertie Bostrom
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/06

Date

561-842-2524

Daytime Phone #