
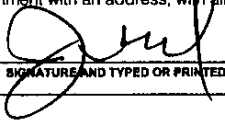


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # N04062			
1. Entity Name LAKE WINDWOOD CONDOMINIUM III ASSOCIATION, INC.			
Principal Place of Business 300 PALMWOOD PL BOCA RATON, FL 33431 US		Mailing Address 300 PALMWOOD PLACE BOCA RATON, FL 33431	
DO NOT WRITE IN THIS SPACE			
		01262007 No Chg-NP CR2E037 (4/06)	
		4. FEI Number 59-2438787	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GELFAND, MICHAEL J 1555 PALM BEACH LAKES BLVD., STE 1220 WEST PALM BEACH, FL 33401		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 _____ <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, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U00000624050 02/14/07-80016-006 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PURLAND, JOHN R 1101 BEL AIR DR #6 HIGHLAND BEACH, FL 33487		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAGOOD, ROBERT E 300 PALMWOOD PLACE, #P-103 BOCA RATON, FL 33431		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FANKHAUSER, SUSAN 414 HARRISON CT. VERNON HILLS, IL 60061		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS 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: 		John R. Purland, Secy/Treas 2/1/07	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	