2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2006 8:00 am Secretary of State 05-03-2006 90255 003 ****61.25

1. Entity Nam	MENT # N050000039 L POINT CONDOMINIUM AS				.		1.23
333 SOUTH TAMIAMI TRAUL 333 SUITE 101 SUITE		Mailing Address 333 South Tamiami trai Suite 103 Venice, FL 34285	3 South Tamiami traul IITE 101				[[1] 1
2. Principal P	Place of Business	3. Mailing Address			iii 800 010 010 010		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		03242006 Ch	g-NP	CR2E037 (11/05)	
City & Stat	e	City & State		4. FEL Number 270	3463	• ⊢	oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of Sta	tus Desired	See Require	
	6. Name and Address of Current Re	gistered Agent	Name	7. Name and Addr	ess of New Re	gistered Agent	
,	MICHAEL W TH TAMIAMI TRAUL I			s (P.O. Box Number is N	ot Acceptable)		
VENICE, F	FL 34285		City			FL Zip Cod	le
the obligat	named entity submits this statement for the lions of registered agent.	ne purpose of changing its reg	gistered office or regist	ered agent, or both, in t	he State of Flor	rida. I am familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE: Re	egistered Agent signature requi	red when reinstating)		DATE	
SIGNATURE	Signature, typed or printed name of registered agent and Filling Fee is \$61.25 Due by May 1, 2006	9. Election Campa Trust Fund Con	aign Financing	\$5.00 May Be Added to Fees		DATE ake check payable to da Department of S	
SIGNATURE	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRECT	9. Election Campa Trust Fund Con	aign Financing	\$5.00 May Be	Flori	ike check payable t da Department of S	tate
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campa Trust Fund Con CTORS	aign Financing ntribution.	\$5.00 May Be Added to Fees	Flori	ake check payable t da Department of S	tate
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRECT PD PARRISH, JAYNE E 333 SOUTH TAMIAMI TRAIL, SUIT	9. Election Campa Trust Fund Con CTORS Delete E 101	aign Financing atribution. 11. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Flori	ike check payable t da Department of S	tate
10. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIRECT PD PARRISH, JAYNE E 333 SOUTH TAMIAMI TRAIL, SUIT VENICE, FL 34285 STD DISTEFANO, PAUL 333 SOUTH TAMIAMI TRAIL, SUIT	9. Election Campa Trust Fund Con CTORS Delete E 101 Delete	aign Financing Intribution. 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Flori	ake check payable to da Department of S	1 10 Addition
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12. 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 or supplied with last and accurage and that middle 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 tradstee empowered to execute this report as recentled 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 their like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME F SIGNING OFFICER OR DIRECT 4.17-06

941-44-1380