

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

FILED
Feb 22, 2007 08:00 AM
Secretary of State

DOCUMENT # N05804	
1. Entity Name LAKE WINDWOOD CONDOMINIUM V ASSOCIATION, INC.	
Principal Place of Business 2800 PALMWOOD TERR BOCA RATON, FL 33431 US	Mailing Address 2800 PALMWOOD TERR BOCA RATON, FL 33431 US



01262007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2512688	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 PETERS, LISA 2850 PALMWOOD TERR, P227 BOCA RATON, FL 33431	DO NOT WRITE IN THIS SPACE
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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 \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PETERS, LISA 2850 PALMWOOD TERR P227 BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NEUMAN, THOMAS 2800 PALMWOOD TERR #P-122 BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARY, HANSEN 2800 PALMWOOD TERR P-222 BOCA RATON, FL 33431
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**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: Lisa Peters, President 2/19/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #