

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

07 SEP 11 AM 6:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N06000001808

1. Entity Name
CONCERNED RESIDENTS OF LAKE CLARKE SHORES,
CORPORATION



Principal Place of Business
8115 PINETREE LANE
LAKE CLARKE SHORES, FL 33406

Mailing Address
8115 PINETREE LANE
LAKE CLARKE SHORES, FL 33406

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

PO Box 21801

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
WEST PALM BEACH

Zip

Country

Zip
33409

Country
US

4. FEI Number

22-3921582

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 resigning)

DATE

Filing Fee is \$81.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
MACGREGOR, JOHN
8115 PINETREE LANE
LAKE CLARKE SHORES, FL 33406 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
MATHIS, MARLENE
8115 PINETREE LANE
LAKE CLARKE SHORES, FL 33406 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
KULKARNI, PANNA
8115 PINETREE LANE
LAKE CLARKE SHORES, FL 33406 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
BANNA I GHIO
1005 CARISSA ROAD
LAKE CLARKE SHORES FL 33406 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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CITY - ST - ZIP
☐ Change ☐ Addition

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. Macgregor

JOHN R. MACGREGOR

4/9/07

(361) 350 3614

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #