2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000009505

1. Entity Name

LAKÉVIEW GARDENS CONDOMINIUM NO. 1 CONDOMINIUM ASSOCIATION, INC.



FILED Jan 07, 2008 8:00 am Secretary of State

01-07-2008 90038 020 ****70.00

				1	-1 ILE						
Principal Place of Business 1931 WEST LAKEVIEW BOULEVARD NORTH FORT MYERS, FL 33903			Mailing Address 1931 WEST LAKEVIEW NORTH FORT MYERS, F								
2. Principal P	lace of Busin	ess - No P.O. Box#	3. Mailing Address								
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Suite, Apt. #, etc.			Suite, Apt. #, etc.			01052008 Chg-NP CR2E037 (12/06)					
City & State			City & State			4. FEI Number 65-023301	9			pplied For	
Zip		Country	Zip	Zip Country		5. Certificate of St	atus Desired	⊠	\$8.75 Ad	iditional	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent						
DEBOEST	DICHAD	D D II		Name	-	·		_			
DEBOEST 1415 HEN	DRY STR	EET		Street	Address (f	P.O. Box Number is Not Acceptable)					
FORT MYI	EKS, FL 3	33901				······································					
				City				FL	Zip Cor	le	
	named entity		the purpose of changing its	registered office	or register	ed agent, or both, in	the State of Flori	da. Iam	familiar with	and accept	
		•									
SIGNATURE	Signature, typed	or printed name of registered agent a	ind title if applicable. (NOTE	E: Registered Agent signi	nature required	when reinstating)		DATE			
			2.51.1.0				I				
,		e is \$61.25 lay 1, 2008	9. Election Can Trust Fund C	npaign Financing Contribution.		\$5.00 May Be Added to Fees			k payable tment of S		
10.		OFFICERS AND DIF	RECTORS 11.		Α	DDITIONS/CHANG	ES TO OFFICERS	S AND DI	RECTORS II	V 10	
TITLE	D		⊠ Delete	TITLE D	Ι.					☐ Addition	
NAME	WARREN	, EVA		NAME /	4110 8	A MEM	ICKEN		-4 7		
STREET ADDRESS	Į.	ST LAKEVIEW BLVD. #		STREET ADDRESS		W. LAKE			42		
CITY-ST-ZIP		ORT MYERS, FL 3390	3	CITY-ST-ZIP	N.F	T. MYERS	, FLA. 33	903			
MITE .	D		Delete	TITLE V D							
NAME	PRINCE, STEFANIE					57 TUDY	11 OT		Change	Addition	
STREET ADDRESS			-	NAME F	FRO	DETURN	HART	i va 1	_ ,	Addition	
		ST LAKEVIEW BLVD. #		NAME F STREET ADDRESS	1931	W. LAKEL	iew B		±6	☐ Addition	
CITY-ST-ZIP	NORTH F		3	NAME F STREET ADDRESS CITY-ST-ZIP	1931	W. LAKEV ET. MYER	iew B		3		
TITLE	NORTH F	ST LAKEVIEW BLVD. # ORT MYERS, FL 3390		NAME STREET ADDRESS CITY-ST-ZIP TITLE 5	1931	W. LAKED ET. MYER	vi l FW B. ES , 1=14.	<u>3390</u>	±6	Addition	
	DEL VEC	ST LAKEVIEW BLVD. # ORT MYERS, FL 3390 CHIO, DAVID	3	STREET ADDRESS CITY-ST-ZIP TITLE 5	1931 V.1	W. LAKED ET. MYER RLENE	view B. Es, I-la. Janse	3 <u>390</u> N	± 6 □ 3 □ Change		
TITLE NAME	D DEL VECO 1931 WES	ST LAKEVIEW BLVD. # ORT MYERS, FL 3390	3 Delete	NAME STREET ADDRESS CITY-ST-ZIP TITLE 5	1931 VII CHA 1931	W.LAKEVERLENE W.LAKE	view B S, Fla. Janse Eujew	3 <u>390</u> N 13LV	±6 3 ☑ Change		
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c. Thereby certify that the information supplied with this hilling does not quality 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:

CHARLENE JANSEV

CHARLENE JANSEV

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