FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 17 1997 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

LAGU	DEL MAN CONDOMINION	A ASSOCIATION, INC.			
Principal Plac	e of Business	Mailing Address			001 01011 01011 01011 01011 01011 01011 1001
C/O CAMPBELL PROPERTY MANAGEMENT 1215 E HILLSBORO BLVD DEERFIELD BCH FL 33441 US		C/O CAMPBELL PROPI 1215 E HILLSBORO BL DEERFIELD BCH FL 33 US	VD	3. Date Incorporated or Qualified 02/12/1985	3a. Date of Last Report 03/13/1996
2. Principal Place of Business		2a. Mailing Address	·	4. FEI Number	Applied For
21		26			Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Žip	Country	Zip	Country	8. This corporation has liability for	
24 `	25	29	30		Yes No
	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New Re	ogistered Agent
BECKER & POLIAKOFF, P.A. EMERALD LAKE CORPORATE PARK 3111 STIRLING RD FT LAUDERDALE FL 38312 B4 City DEER FL BC FL 3344 11. Pursuant to the provisions of Sections 5170502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered largent of provisions of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am family rund, and accept the appointment as registered statutes. SIGNATURE					
	Suriatrire, typed or printed name il registere		(NOTE Registered Agent signature		DATE
12.		AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12 Change
TITLE NAME	D 5/1 RUMENS, WILLIAM	☐ DELETE	1.1 TITLE 1.2 NAME	see now.	El circlide El vocilion
STREET ADDRESS	7650 LAGO DEL MAR DR	206	1.3 STREET ADDRESS		
CHY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP		
TITLE	D	⋈ DELETE	2.1 TITLE	ELISE ARNEL . 1810 LAGO DEL 1 BOLA BATON FL	➤ Change ► Addition
NAME	LISSAU, ROBERT		2.2 NAME	Do to LOCA DEL	200 00
STREET ADDRESS	7750 LAGO DEL MAR DR	S704	2.3 STREET ADDRESS	7010 KITGO UEL 1	MAR DE
C/TY - ST - ZIP	BOCA RATON FL		2. 4 CITY-ST-ZIP	BOUN KATON FL	<i></i>
TITLE	# PRESIDENT	DELETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS	HOROWTIZ, JEANNE 7810 LAGO DEL MAR DR	\$100 <i>t</i>	3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL	01007	3.4. CITY-ST-ZIP	_	i
TITLE	D/V. Pres.	DELETE	4.1 TITLE	Vice President	Change Addition
NAME	HORWITZ, LAWRENCE		4. 2 NAME		<u> </u>
STREET ADDRESS	7810 LAGO DEL MOR DRI	VE \$1004	4.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		4.4 CITY-ST-ZIP		
TITLE	D	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SCHICTEL, ROBERT		5.2 NAME		
STREET ADDRESS	7770 LAGO DEL MAR DRI	VE #804	5.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL	- December	5.4 CITY-ST-ZIP		D Oberes D Admi
TITLE	D COURTE DOWN	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME DESCRIPTION	SCHITEL, DONNA	VE #1012	6.2 NAME		
STREET ADDRESS	7810 LAGO DEL MAR DRI	AE AIDIO	6.3 STREET ADDRESS		
CITY-ST-ZIP 14. I do here	BOCA RATON FL by certify that the information sup	plied with this filing does not o	6.4 CITY-ST-ZIP ualify for the exemption s	tated in Section 119.07(3)(i), Florida Statute	es. I further certify that the
information lam an c	on indicated on this annual report	or supplemental annual report n or the receiver or trustee em	is true and accurate and powered to execute this r	that my signature shall have the same legi eport as required by Chapter 617, Florida S	al effect as if made under oath; that i