


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**May 23, 2006 8:00 am**  
**Secretary of State**

05-23-2006 90012 043 \*\*\*\*61.25

**DOCUMENT # N07587**  
 1. Entity Name  
**LAGO DEL MAR CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**MONTOYA CIRCLE  
 BOCA RATON FL 33433  
 US**

Mailing Address  
**1215 E. HILLSBORO BLVD  
 DEERFIELD BEACH FL 33444  
~~PO Box 881151~~  
 BOCA RATON, FL 33488**



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
**PO BOX 881151**  
 Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State  
**BOCA RATON, FL**

4. FEI Number  
**59-2494599**

Applied For  
 Not Applicable

Zip  
**33488**

Country  
**USA**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**GELFARD, MICHAEL  
 1555 PALM BEACH LAKES BLVD., #1220  
 WEST PALM BEACH FL 33401**

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 reinstating) DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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	Delete
D	MALKA, MONICA	1215 E. HILLSBORO BLVD.	DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/>
P	ANDRON, ERIC	1215 E. HILLSBORO BLVD.	DEERFIELD BEACH FL 33441	<input type="checkbox"/>
<del>SR</del>	SANTHOUSE, CHARLES	1215 E. HILLSBORO BLVD.	DEERFIELD BEACH FL 33441	<input type="checkbox"/>
D	DENKLER-ARGOU, ANN	1215 E. HILLSBORO BLVD.	DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/>
D	STEWART, JOANN	1215 E. HILLSBORO BLVD.	DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/>
D	OVAKRINE, ROQUEL	1215 E. HILLSBORO BLVD.	DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
T	<del>ERIC</del> ERIC PINKIS	PO BOX 881151	BOCA RATON, FL 33488	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	SARAH FISHER	PO BOX 881151	BOCA RATON, FL 33488	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Rachel Yudewite	PO BOX 881151	BOCA RATON, FL 33488	<input type="checkbox"/>	<input checked="" type="checkbox"/>
✓	SANTHOUSE, CHARLES	PO BOX 881151	BOCA RATON, FL 33488	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P	ANDRON, ERIC	PO BOX 881151	BOCA RATON, FL 33488	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:** \_\_\_\_\_