## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## DOCUMENT # N09996

1. Entity Name LAKE SEMINOLE VILLAS CONDOMINIUM ASSOCIATION, INC.



**FILED** Feb 16, 2006 08:00 AM **Secretary of State** 

Principal Place of Business

Mailing Address

**255 COREY AVE** 

P.O. BOX 67128

ST PETE BEACH, FL 33706

ST PETE BEACH, FL 33736



## DO NOT WRITE IN THIS SPACE

01262006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 59-2650870

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLINGEL, JOSEPH W 255 COREY AVE ST PETE BEACH, FL 33706

## DO NOT WRITE IN THIS SPACE

		ra La				
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						
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financing     Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS				** . *		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SKIPPER, PAUL J. 265 COREY AVENUE SAINT PETERSBURG, FL 33706				CH Blaten (A STORE)	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	LTD KLINGEL, JOSEPH W. 255 COREY AVENUE SAINT PETERSBURG, FL 33706				000000436366 62/27/06-80034-009 61.25	
TITLE NAME STREET ADDRESS CSTY-ST-ZSP	O ST. CLAIR, JOYCE A. 255 COREY AVENUE SAINT PETERSBURG, FL 33708			DO	DO NOT WRITE	
title name street aduress city-st-zip				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

12. Thereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

Joseph W. Klingel

2/24/06

Daytime Phone 4