

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 24, 2011
Secretary of State

DOCUMENT# N11186

Entity Name: LAKESHORE 6 CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1270 S. FRANKLIN AVE.
HOMESTEAD, FL 33034**New Principal Place of Business:****Current Mailing Address:**1270 S. FRANKLIN AVE.
HOMESTEAD, FL 33034**New Mailing Address:****FEI Number:** 59-2686319**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BASS, MICHAEL G
8900 SW 107 AVE STE 206
MIAMI, FL 33176 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: WOODSIDE, WILBUR
Address: 929 HAMILTON DR #K
City-St-Zip: HOMESTEAD, FL 33034

Title: D
Name: SPISIAK, JAMES
Address: 450 NE 1ST RD
City-St-Zip: HOMESTEAD, FL 33030

Title: VPD
Name: URSCHER, MARIA
Address: 929 HAMILTON DR #G
City-St-Zip: HOMESTEAD, FL 33034

Title: SD
Name: THOMPSON, SONYA
Address: 889 HAMILTON DR. #K
City-St-Zip: HOMESTEAD, FL 33034

Title: PD
Name: CARPENTER, VINCENT
Address: 1453 S LIBERTY AVE #J
City-St-Zip: HOMESTEAD, FL 33034

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WILBUR WOODSIDE

TD

08/24/2011

Electronic Signature of Signing Officer or Director

Date