


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N14282		
1. Entity Name LAKE WINDWOOD CONDOMINIUM VI ASSOCIATION, INC.		
Principal Place of Business 2900 OLIVEWOOD TERRACE BOCA RATON, FL 33431		Mailing Address 2900 OLIVEWOOD TERRACE BOCA RATON, FL 33431
DO NOT WRITE IN THIS SPACE		
		01262007 No Chg-NP CR2E037 (4/06)
4. FEI Number 59-2690121		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent GELFARD, MICHAEL J % GELFAND & ARPE, P.A. 1555 PALM BEACH LAKES BLVD STE 1220 WEST PALM BEACH, FL 33401		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		 U00000633894 02/21/07-80080-013 61.25 DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PETERS, LEN J 2900 OLIVE WOOD TERR, # O-201 BOCA RATON, FL 33431	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD VON STETTEN, JOHN 390 NW 53RD ST BOCA RATON, FL 33487	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAUX, DOUGLAS 2950 OLIVEWOOD TERR O-207 BOCA RATON, FL 33431	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing 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.		
SIGNATURE: <u>John VonStetten, Treasurer</u> <u>2/7/07</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>