


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

**FILED**  
Feb 09, 2006 08:00 AM  
Secretary of State

**DOCUMENT # N14785**  
1. Entity Name  
LAGOON LANE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 11901 LAGOON LANE UNIT #302 TREASURE ISLAND, FL 33706	Mailing Address 11901 LAGOON LANE UNIT #302 TREASURE ISLAND, FL 33706
--	--

**DO NOT WRITE IN THIS SPACE**



01302006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-2074769	Applied For Not Applicable
-----------------------------	-------------------------------

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

6. Name and Address of Current Registered Agent  
  
SHERMAN, ALTON  
11901 LAGOON LANE  
UNIT #302  
TREASURE ISLAND, FL 33706

**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: Alton Sherman (NOTE: Registered Agent signature required when reinstating) DATE: 2/1/06

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. 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 GRAMLING, GEORGE F III 118 SOUTH NEWPORT AVENUE TAMPA, FL 33606
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILLER, ALVIN A 30 WHITE OAK COURT CAUFIELD, OH 44406
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WASSMUTH, ROBERT K B21 MINSI TRAIL PERKASIE, PA 18944
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000427705  
02/21/06-80019-004 61.25

**DO NOT WRITE  
IN THIS SPACE**

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: R. Keith Wassmuth R. Keith Wassmuth 2/1/06 215-257-2904  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Cayenne Phone #