

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N15966

1. Entity Name
LAKESHORE 4 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
1270 S. FRANKLIN AVE.
HOMESTEAD, FL 33034

Mailing Address
1270 S. FRANKLIN AVE.
HOMESTEAD, FL 33034

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08242007

Chg-NP

CR2E037 (12/06)

4. FEI Number

59-2720237

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BASS, MICHAEL G
8900 SW 107 AVE. #206
MIAMI, FL 33176

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

**Filing Fee is \$61.25
Due by September 14, 2007**

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	PD	<input type="checkbox"/> Delete
NAME	MISENTI, EVELYN	
STREET ADDRESS	1150 F N LIBERTY	
CITY-ST-ZIP	HOMESTEAD, FL 33034	
TITLE	SD	<input type="checkbox"/> Delete
NAME	TOWNLEY, LINDA	
STREET ADDRESS	1151 E N LIBERTY	
CITY-ST-ZIP	HOMESTEAD, FL 33034	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CARRILLO, TINA	
STREET ADDRESS	1150 K. NORTH LIBERTY AVENUE	
CITY-ST-ZIP	HOMESTEAD, FL 33034	
TITLE	D	<input type="checkbox"/> Delete
NAME	SIGLOR, CHARLOTTE	
STREET ADDRESS	1151 G NORTH LIBERTY AVENUE	
CITY-ST-ZIP	HOMESTEAD, FL 33034	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/25/07 FILED
07 OCT 11 PM 6:17
61.25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



LAKESHORE COMMUNITY ASSOCIATION, INC.
1270 S. FRANKLIN AVE.
HOMESTEAD, FL 33034
305/245-1885 FAX 245-1843

October 4, 2007

Russ Hunt
P.O. Box 6327
Tallahassee, FL 32314

Re: Corp Annual Reports
#N11183
#N15966
#N09491

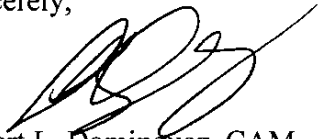
Russ:

Thank you for your help; I really don't know what happened with these associations. I send these out at the same time every year. Please find the forms attached.

As for form #N11186 as stated over the phone I can't prove it was sent due to the previous management company but I am searching for a copy of the original check. However, I have ordered a new check and will be sending it off as soon as I get it signed.

If you have any questions regarding this matter, please feel free to contact my office.

Sincerely,

A handwritten signature in black ink, appearing to read 'ALBERT L. DOMINGUEZ', with a long horizontal line extending from the end of the signature.

Albert L. Dominguez, CAM