2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N16500

FILED Feb 13, 2008 8:00 am Secretary of State

DOCUMENT # N16500 1. Entity Name LAKE WINDWOOD CONDOMINIUM VIII ASSOCIATION, INC.					Secretary of State 02-13-2008 90024 050 ****61.25				
Principal Place 320 OLIVEW BOCA RATON		Mailing Address -320 OLIVEWOOD PLBOCA RATON, FL-3343	'1		1 107/160 831	MRIS ENTI BNII BRIG BI	III AITE AFAIL AFAIL AFAIL	ian Glaine al IPal	
2. Principal P	Mace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt.	#, etc.	c/o Gates M. Suite, Apt. #, etc.	gmt Ser	vice	01242008	05 - 110	0000007 (40		
		P.O. Box 2568				Chg-NP	CR2E037 (12		
City & State		Boca Raton, FL			4. FEI Numbe 59-2734	912		Applied For Not Applica	—
Zip	Country	Zip 33427	Country US		5. Certificate of	of Status Desired		5 Additional equired	
	6. Name and Address of Current	 	Name		7. Name and	Address of New	Registered Agent		
GELFAND, MICHAEL J									
GELFAND & ARPE, P.A. 1555 PALM BEACH LAKES BLVD, SUITE 1220			Street	Address (I	P.O. Box Numbe	r is Not Acceptab	le) 		
WEST PAI	LM BEACH, FL 33401		City		<u> </u>	<u> </u>	—• 7ii	Code	
	named entity submits this statement fo						FL		
the obligations of registered agent. SIGNATURE									
SIGNATORE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent sign	áture required	(when reinstating		DATE		
- SIGNATORE	Signature, typed or printed name of registered agent. Filling Fee is \$61.25 Due by May 1, 2008	·	paign Financing	ature required	\$5.00 May Be Added to Fees		DATE Wake check pays rida Department		
10.	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DIF	B. Election Carr Trust Fund C RECTORS	npaign Financing contribution.		\$5.00 May Bo Added to Fees	Flo	Wake check pays rida Department ERS AND DIRECTO	of State	
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Thereby certify that the information supplied with this tilling does not equally full the exemploids contained in contained in the contained on this report or supplied with this hand a courted and that my signature shall have the same legal effect as if made under eath; 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 Statules; 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: