

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2006 8:00 am**  
**Secretary of State**

04-04-2006 90046 025 \*\*\*\*61.25

**DOCUMENT # N22446**

1. Entity Name  
**LAKE IN THE WOODS AT VERO BEACH CONDOMINIUM  
ASSOCIATION, INC.**



Principal Place of Business  
**1900 WATERFORD DR  
VERO BEACH, FL 32966 US**

Mailing Address  
**1900 WATERFORD DR  
VERO BEACH, FL 32966 US**

**20024826**



01122006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-2793180**

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**

**LEVINE, JAY  
2500 N. MILITARY TRAIL #409  
BOCA RATON, FL 33431**

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 May 1, 2006**

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**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE **P** ☒ Delete  
NAME **BECK, J. VANN**  
STREET ADDRESS **1940-B WESTMINSTER CIRCLE**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **P** ☒ Change ☐ Addition  
NAME **BARRY SACHS**  
STREET ADDRESS **1954-2 WESTMINSTER CIRCLE**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **VP** ☐ Delete  
NAME **SACHS, BARRY**  
STREET ADDRESS **1954-2 WESTMINSTER CIRCLE**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **T** ☐ Change ☒ Addition  
NAME **JIMMY ANDERSON**  
STREET ADDRESS **1924-8 WESTMINSTER CIRCLE**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **T** ☒ Delete  
NAME **ARCHAMBAULT, RAYMOND**  
STREET ADDRESS **1810-7 WATERFORD DR.**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **VP** ☐ Change ☒ Addition  
NAME **DICK COLLETTE**  
STREET ADDRESS **1810-1 WATERFORD DR.**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **S** ☒ Delete  
NAME **SACHS, BARRY**  
STREET ADDRESS **1954-2 WESTMINSTER CIRCLE**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **S** ☐ Change ☒ Addition  
NAME **JUNE FLAGG**  
STREET ADDRESS **1954-4 WESTMINSTER**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE **D** ☐ Delete  
NAME **BURKELAND, DARRELL**  
STREET ADDRESS **1860-A WATERFORD DRIVE**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME **TRUESDELL, LINDA**  
STREET ADDRESS **1901-2 WESTMINSTER CIRCLE**  
CITY-ST-ZIP **VERO BEACH, FL 32966**

TITLE ☐ Change ☐ 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 #

**BARRY J. SACHS Pres. 3/23/06**  
**(772) 794 9099**