


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2006 8:00 am
Secretary of State

03-15-2006 90097 005 ****61.25

DOCUMENT # N34211	
1. Entity Name LAKESIDE GREEN HOMEOWNERS ASSOCIATION NO. 9, INC.	

Principal Place of Business 1928 LAKE WORTH RD LAKE WORTH FL 33461	Mailing Address 1928 LAKE WORTH RD LAKE WORTH FL 33461
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 65-0188816	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ASSOCIATED PROPERTY MANG. 1928 LAKE WORTH RD LAKE WORTH FL 33461
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7. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when re-registering)

Signature, typed or printed name of registered agent and title if applicable

DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LLOYD, ADAM 4981 BROADSTONE CIR WEST PALM BEACH FL 33417 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD LURIE, ARNOLD 4380 CAMROSE LANE WEST PALM BEACH FL 33417 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD FRIETAS, JULIE 4280 CAMROSE LN WEST PALM BEACH FL 33417 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LACON, PETER 4441 CAMROSE LN WEST PALM BEACH FL 33417 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DEAN, LINDA 4431 CAMROSE LANE WEST PALM BEACH, FL 33417 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 



ATTACHMENT

OGDEN UT 84201-0038

In reply refer to: 0441424422
Feb. 14, 2006 LTR 3064C E0
90-0109028 200412 02 000

12006

BODC: SB

40031910
N34211

COCOPLUM P O A OF PALM BEACH INC

~~% CAMPBELL PROPERTY MANAGEMENT~~

1928 LAKE WORTH RD

LAKE WORTH FL 33461-4228287



006803

Taxpayer Identification Number: 90-0109028
Tax Period(s): Dec. 31, 2004

Form: 1120

Dear Taxpayer:

Thank you for your Form 1120H, dated Dec. 29, 2005.

It appears an incorrect employer identification number was listed on your Form 1120-H. The number in our records is shown above. Please use it on all future tax returns and correspondence.

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

... ATTACHMENT

40031910

N34211

0441424422

Feb. 14, 2006 LTR 3064C EO

90-0109028 200412 02 000

12007

COCOPLUM P O A OF PALM BEACH INC

~~% CAMPBELL PROPERTY MANAGEMENT~~

1928 LAKE WORTH RD

LAKE WORTH FL 33461-4228287

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,

Rita Sandoval

Rita Sandoval

Accounts Management II

Enclosure(s):

Copy of this letter