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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N39736 (6)

1. Corporation Name

LAKE POINTE ESTATES HOMEOWNERS' ASSOCIATION, INC

Principal Place of Business

P.O. BOX 5132
OAKLAND PARK FL 33310

Mailing Address

P.O. BOX 5132
OAKLAND PARK FL 33310



3. Date Incorporated or Qualified
08/30/1990

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RANDALL E. ROGER
1500 CYPRESS CREEK ROAD
STE. 207
FORT LAUDERDALE FL 33309

81 Name PETER G. HERMAN
82 Street Address (P.O. Box Number is Not Acceptable)
110 TOWER, 20 FLOOR
83 110 S.E. 6 STREET
84 City FORT LAUDERDALE FL 85 Zip Code 33301

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0603, Florida Statutes.

SIGNATURE

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

Peter G. Herman, Esq.

5/28/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
D	GERRI KARALIOLIOS	3232 NW 22 AVE OAKLAND PARK FL		<input checked="" type="checkbox"/>
T	NANCY BUTZKY	P.O. BOX 5132 N/A OAKLAND PARK FL		<input type="checkbox"/>
D	RANSON JOHNSON	3219 NW 22 AVE OAKLAND PARK FL		<input checked="" type="checkbox"/>
S	WAYNE SCHUBNEL	P.O. BOX 5132 N/A OAKLAND PARK FL 33310		<input checked="" type="checkbox"/>
P	NORMAN BERKOWITZ	P.O. BOX 5132 N/A OAKLAND PARK FL 33310		<input checked="" type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
P	NANCY BUTZKY	3237 N.W. 22 AVE OAKLAND PARK, FL 33309		<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	MIKE EISSMAN	3220 NW. 22 AVE OAKLAND PARK, FL 33309		<input type="checkbox"/>	<input checked="" type="checkbox"/>
T	WILLIAM D. YOUNG	3248 NW. 22 AVE. OAKLAND PARK, FL 33309		<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	KRISTINE DAVIS	3246 NW 22 AVE. OAKLAND PARK, FL 33309		<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	EDWARD FULOP	3215 NW 22 AVE. OAKLAND PARK, FL 33309		<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William D. Young
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
TREASURER

DATE

Daytime Phone #

CR2E037 (12/95)