2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State
04-27-2006 90213 044 ****61.25

DOCUMENT # N47550

1. Entity Name
LAGO DEL REY CONDOMINIUM, INC. 11

Principal Place of Business	Mailing Address
~~MANAGEMENT SERVICES OF AMERICA, INC.~~ ~~639 EAST OCEAN AVENUE, SUITE 204~~ ~~BOYNTON BEACH, FL 33435 US~~	~~MANAGEMENT SERVICES OF AMERICA, INC.~~ ~~639 EAST OCEAN AVENUE, SUITE 204~~ ~~BOYNTON BEACH, FL 33435 US~~

04102006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
2200 N. Federal Hwy	2200 N. Federal Hwy.
Suite, Apt. #, etc.: 212	Suite, Apt. #, etc.: 212
City & State: Boca Raton, FL.	City & State: Boca Raton, FL
Zip: 33431 Country: USA	Zip: 33431 Country: USA

4. FEI Number: 65-0318416 ☐ 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
~~HUCKABY, JANET~~ ~~MANAGEMENT SERVICES OF AMERICA, INC~~ ~~639 EAST OCEAN AVE, SUITE 204~~ ~~BOYNTON BEACH, FL 33435~~	Name: LENNIE PIZZURE Street Address (P.O. Box Number is Not Acceptable): 2200 N. Federal Hwy. # 212 City: Boca Raton FL Zip Code: 33431

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] DATE: 4.25.06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TANKEL, JUNE 829 CAMINO RD DELRAY BEACH, FL 33445	☑ ~~Delete~~	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Robert Yacker 829 Camino Road #110 Delray Beach, FL. 33445	☐ Change ☑ ~~Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ZIEFF, JOAN 829 CAMINO RD DELRAY BEACH, FL 33445	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SUZANNE SANTINO 829 Camino Road #107 Delray Beach, FL 33445	☐ Change ☑ ~~Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLLIGAN, ANN 829 CAMINO RD DELRAY BEACH, FL 33445	☑ ~~Delete~~	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SUE ELLEN REEVE 829 Camino Road #206 DELRAY Beach, FL. 33445	☐ Change ☑ ~~Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JOYCE, ELIZABETH 829 CAMINO RD DELRAY BEACH, FL 33445	☑ ~~Delete~~	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Sheila Aumiller 829 Camino Road #210 Delray Beach, FL. 33445	☐ Change ☑ ~~Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD STAS, JEANETTE 829 CAMINO ROAD DELRAY BEACH, FL 33445	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Stas, Jeanette 829 Camino Rd Delray Beach FL 33445	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RJ DePhillipp 829 Camino Rd Delray Beach FL 33445	☐ Change ☑ ~~Addition~~

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] Robert Yacker 4/22/06 561-404-4088
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #