


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 08, 2007 8:00 am**  
**Secretary of State**

03-08-2007 90023 014 \*\*\*\*61.25

<b>DOCUMENT # N51450</b> 1. Entity Name <b>NORTHWEST LAUDERHILL NEIGHBORS ASSOCIATION, INC.</b>	
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Principal Place of Business <b>8031 N.W. 45 STREET LAUDERHILL FL 33351</b>	Mailing Address <b>8031 N.W. 45 STREET LAUDERHILL FL 33351</b>
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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City & State  Zip	City & State  Country	4. FEI Number <b>65-0370682</b>	Applied For <input type="checkbox"/> Not Applicable
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1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent  <b>THOMSON, LORA 8031 N.W. 45 STREET LAUDERHILL FL 33351</b>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
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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 *Lora Thomson* 3/1/07  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY ST- ZIP	PT THOMSON, LORA 8031 N.W. 45 STREET LAUDERHILL FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST- ZIP	VP MARCUS, STEVE 8000 NW 51 ST LAUDERHILL FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST- ZIP	TT NOVA, PAT 8140 N.W. 45 STREET LAUDERHILL FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST- ZIP	ST SINGER, JANICE 7751 NW 44 COURT LAUDERHILL FL 33351 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST- ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST- ZIP	DRS MERRILL, GLORIA 8501 NW 45TH ST LAUDERHILL FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST- ZIP	D HELEN, SUE LEE 8021 NW 44TH CT LAUDERHILL FL 33351 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

*EDYE CLEMENTS  
7810 NW 45 ST.  
LAUDERHILL, FL 33351*

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: *Lora Thomson Pres.* 3/1/07