

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003048

FILED
Apr 29, 2009
Secretary of State

Entity Name: LAKEVIEW TOWNHOMES AT UNIVERSITY PARK ASSOCIATION, PARCEL 11, INC.

Current Principal Place of Business:

C/O ALLIED PROPERTY MANAGEMENT GROUP INC.
1711 WORTHINGTON ROAD, SUITE 103
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

C/O ALLIED PROPERTY MANAGEMENT GROUP INC.
1711 WORTHINGTON ROAD, SUITE 103
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-0562560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIED PROPERTY MANAGEMENT GROUP INC.
1711 WORTHINGTON ROAD
SUITE 103
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

STRALEY & OTTO, P.A.
2699 STIRLING ROAD
SUITE C-207
FT. LAUDERDALE, FL 33312 US

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.

SIGNATURE: CHARLIE OTTO

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: WALTERS, LINDA
Address: 8449 SW 23 CT
City-St-Zip: MIRAMAR, FL 33025

Title: VP () Delete
Name: BRGOS, IVAN
Address: 8466 SW 23RD CT
City-St-Zip: MIRAMAR, FL 33025

Title: SD () Delete
Name: SMITH, DEANN
Address: 2260 SW 84TH WAY
City-St-Zip: MIRAMAR, FL 33025

Title: TD () Delete
Name: PEARSON, NORMA
Address: 8316 SW 23RD CT
City-St-Zip: MIRAMAR, FL 33025

Title: D () Delete
Name: WHITE, LINDA
Address: 2261 SW 83RD AVE
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SHARPLESS, MICHAEL
Address: 2251 SW 84TH TERR.
City-St-Zip: MIRAMAR, FL 33025

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: WILLIAMS, BERNARD
Address: 8364 SW 23RD CT.
City-St-Zip: MIRAMAR, FL 33025

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEANN SMITH

SD

04/29/2009

Electronic Signature of Signing Officer or Director

Date