

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N94000003882 (7)**

1. Corporation Name

LAWRENCE OAKS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2240 WOOLBRIGHT RD
BOYNTON BEACH FL 33426

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BOYNTON BEACH FL 33426

3. Date Incorporated or Qualified
08/05/1994

3a. Date of Last Report
04/28/1995

2. Principal Place of Business
21 **4000 S. 57th Ave Suite 101**

2a. Mailing Address
26 **P.O. Box 6848**

4. FEI Number
65-0661577

Applied For
Not Applicable

22 **LAKE WORTH, FL**

27 **LAKE WORTH, FL**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

24 **33463**

25 **FLA**

29 **33464**

30 **FLA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GELLER, HARVEY
2240 WOOLBRIGHT RD
BOYNTON BEACH FL 33426

81 Name **JERRY FLATOW % Property Mgmt. Resources**
82 Street Address (P.O. Box Number is Not Acceptable)
4000 S 57th Ave Suite 101
83 **LAKE WORTH, FLORIDA**
84 City
FL 85 Zip Code
33463

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 617.0503, Florida Statutes.

SIGNATURE

[Signature]

5/31/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED
DP	GELLER, HARVEY	2240 WOOLBRIGHT RD	BOYNTON BEACH FL 33426	<input checked="" type="checkbox"/>
DVST	CSAPO, JOHN C	2240 WOOLBRIGHT RD	BOYNTON BEACH FL 33426	<input checked="" type="checkbox"/>
D	FERRICK, ANNETTE	2240 WOOLBRIGHT RD	BOYNTON BEACH FL 33426	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
P/S/D	ALLEN HEARNE	1451 S. MIAMI AVE	MIAMI, FLORIDA 33130	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V/D	MICHAEL SMITH	1451 S. MIAMI AVE	MIAMI, FLORIDA 33130	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T/D	SHARON GIVE	1451 S. MIAMI AVE	MIAMI, FLORIDA	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]

5/30/96 **305-577-8550**

CR2E037 (12/95)