

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004519

FILED
Apr 14, 2005
Secretary of State

Entity Name: LAKEVIEW EDUCATIONAL ASSOCIATION, INC.

Current Principal Place of Business:

C/O LUMONICS
3017 N.W. 60TH ST.
FT. LAUDERDALE, FL 33309

Current Mailing Address:

C/O LUMONICS
3017 N.W. 60TH ST.
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

C/O LUMONICS
3019 N.W. 60TH ST.
FT. LAUDERDALE, FL 33309

New Mailing Address:

C/O LUMONICS
3019 N.W. 60TH ST.
FT. LAUDERDALE, FL 33309

FEI Number: 36-3744632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAPHAEL, BARRY
C/O LUMONICS
3017 N.W. 60TH ST.
FT. LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

RAPHAEL, BARRY
C/O LUMONICS
3019 N.W. 60TH ST.
FT. LAUDERDALE, FL 33309 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: BARRY RAPHAEL

04/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRD () Delete
Name: RAPHAEL, BARRY
Address: 204 NW 92ND TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: PD () Delete
Name: DILLON, LOUISE
Address: 204 NW 92ND TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: PD () Delete
Name: TANNER, DOROTHY
Address: 204 NW 92ND TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOROTHY TANNER

PD

04/14/2005

Electronic Signature of Signing Officer or Director

Date