2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State
05-01-2006 90368 040 ****61.25

DOCUMENT # N96000006313

1. Entity Name
LAKEVIEW AT CARLTON LAKES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
ADVANCED PROPERTY MGMT SERVICE, INC. 3350 WOOD EDGE CIRCLE, STE. 104 BONITA SPRINGS, FL 34134 US	ADVANCED PROPERTY MGMT SERVICE, INC. 3350 WOOD EDGE CIRCLE, STE. 104 BONITA SPRINGS, FL 34134 US

02212006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business
Advanced Property
Management Service, Inc.
1035 Collier Center Way, #7
Naples, FL 34110

3. Mailing Address
Advanced Property
Management Service, Inc.
1035 Collier Center Way, #7
Naples, FL 34110

4. FEI Number
65-0720333
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

THOMPSON, SUSAN L
ADVANCED PROPERTY MGMT SERVICE, INC.
3350 WOODS EDGE CIRCLE, STE. 104
BONITA SPRINGS, FL 34134

7. Name and Address of New Registered Agent

Name: Advanced Property
Street Address (P.O. Box Number is Not Acceptable): Management Service, Inc.
1035 Collier Center Way, #7
City: Naples, FL 34110 FL Zip Code

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: Susan L Thompson SUSAN L. THOMPSON, AGENT 02/21/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS FAIRLEY, RICHARD 4910 DEERFIELD WAY #102 NAPLES, FL 34110	☒ Delete	DS JAN CRAWFORD 5045 CEDAR SPRING DR. #102 NAPLES, FL. 34110	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VALENTINE, RAY 5125 CEDAR SPRINGS DR #104 NAPLES, FL 34110	☐ Delete	DT DE BARBIERI, LAURIE 4910 DEERFIELD WAY #101 NAPLES, FL 34110	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP VENO, DAVID 4960 DEERFIELD WAY NAPLES, FL 34110	☐ Delete	DP VENO, DAVID 4960 DEERFIELD WAY #101 NAPLES, FL 34110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP DENNO, BILL 5020 CEDAR SPRINGS DR #204 NAPLES, FL 34110	☒ Delete	D KALEMBA, JOANN 5070 CEDAR SPRINGS DR. #101 NAPLES, FL 34110	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ASHMORE, TOM 5025 CEDAR SPRINGS DR #102 NAPLES, FL 34110	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OUTSTRICH, JOHN 5115 CEDAR SPRINGS DR #101 NAPLES, FL 34110	☐ Delete	DVP OUTSTRICH, JOHN 5115 CEDAR SPRINGS DR. #101 NAPLES, FL 34110	☒ 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: _____ 4/1/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #