

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P93000044270

1. Entity Name
LAKE PARK 1133 OLD DIXIE ASSOCIATION, INC.



Principal Place of Business
1133 OLD DIXIE HIGHWAY
LAKE PARK, FL 33403

Mailing Address
P.O. BOX 530553
LAKE PARK, FL 33403-2553 US

FILED
Jan 22, 2007 08:00 AM
Secretary of State



01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0416494

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JABLONSKI, WILLIAM
1133 OLD DIXIE HIGHWAY
BAY #7
LAKE PARK, FL 33403

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000597067
01/24/07-80021-012 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JABLONSKI, WILLIAM 1133 OLD DIXIE HIGHWAY, #7 LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JONES, MARLIN P 1133 OLD DIXIE HWY. #8 WEST PALM BEACH, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 607, 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:

Marlin P. Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/07 561-848-8236
Date Daytime Phone #