


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State


04-17-2007 90234 015 ***150.00

DOCUMENT # P96000087004 1. Entity Name LAKE WORTH PROPERTIES, INC.	
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Principal Place of Business 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL	Mailing Address 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL
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DO NOT WRITE IN THIS SPACE

66011845



04022007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0731606	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

KOVALSKY, LISA ESQ.
12255 SW 114TH TERRACE
MIAMI, FL 33186

**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 _____ (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. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO EISENBERG, ROBERT 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EISENBERG, ELAINE 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EISENBERG, CARA 8855 INDIAN RIVER RUN ROAD BOYNTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Robert Eisenberg **ROBERT EISENBERG** 4/30/07 561-731-0029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone