## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000061838

City-St-Zip:

WEST PALM BEACH, FL 33409

Entity Name: LAKEVIEW CLUB GP CORPORATION

FILED Apr 20, 2005 Secretary of State

Littly Nai	IIIE. LANEVIL	W CLOB OF CORPORATION				
Current Principal Place of Business:				New Principal Place of Business:		
1300 N. FLORIDA MANGO RD #15 WEST PALM BEACH, FL 33409				1300 N. FLORIDA MANGO RD SUITE 15 WEST PALM BEACH, FL 33409		
Current Mailing Address:				New Mailing Address:		
1300 N. FLORIDA MANGO DR				1300 N. FLORIDA MANGO RD		
STE 15 WEST PALM BEACH, FL 33409				STE 15 WEST PALM BEACH, FL 33409		
FEI Number:	: 59-3525926	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MALASKY, BRUCE A 1300 N. FLORIDA MANGO RD #15 WEST PALM BEACH, FL 33409 US				MALASKY, BRUCE A 1300 N. FLORIDA MANGO RD SUITE 15 WEST PALM BEACH, FL 33409 US		
	named entity e of Florida.	submits this statement for the p	ourpose o	f changing its registered of	office or registered agent, or both,	
SIGNATURE: BRUCE A MALASKY				04/20/2005		
Electronic Signature of Registered Agent				Date		
Election Car	npaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MALASKY, BR 1300 N. FLOR	) Delete UCE A IDA MANGO RD BEACH, FL 33409		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	MALASKY, ST 1300 N. FLOR	) Delete EPHEN IDA MANGO RD BEACH, FL 33409		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	MALASKY, DO	) Delete NALD C IDA MANGO RD		Title: ( Name: Address:	) Change ()Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: BRUCE A MALASKY P 04/20/2005