

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 10, 2003 8:00 am**  
**Secretary of State**

03-10-2003 90118 003 \*\*\*\*61.25

**DOCUMENT # 711194**

1. Entity Name

**LAKE CLARKE GARDENS CONDOMINIUM, INC.**



Principal Place of Business

**2981 FLORIDA MANGO ROAD  
LAKE WORTH FL 33461-6268**

Mailing Address

**2981 FLORIDA MANGO ROAD  
LAKE WORTH FL 33461-6268**

**10035047**



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1426780**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**WILSON, JOHN W  
2615 S GARDEN DR  
#307  
LAKE WORTH FL 33461**

7. Name and Address of New Registered Agent

Name **Leban,**

Street Address (P.O. Box Number is Not Acceptable)

**2855 S. Garden Dr #211**

City **Lake Worth**

**FL**

Zip Code **33461**

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

*Molly Leban*

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

(NOTE: Registered Agent signature required when reinstating)

**03/03/03**

DATE

**FILE NOW: FEE IS \$61.25**

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	<b>T</b> <b>WARD, KATHERINE J</b> <b>2724 NO. GARDEN #304</b> <b>LAKE WORTH FL 33461</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>WILSON, JOHN</b> <b>2615 SO. GARDEN DR #307</b> <b>LAKE WORTH FL 33461</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DAVENPORT, MARGARET G</b> <b>2669 SO. GARDEN DR #202</b> <b>LAKE WORTH FL 33461</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>CADE, LEDFORD</b> <b>2640 S GARDEN DR., #309</b> <b>LAKE WORTH FL 33461</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ATD</b> <b>ORTIZ, AL</b> <b>2640 SO. GARDEN DR #311</b> <b>LAKE WORTH FL 33461</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>PERTTU, HEIKKI</b> <b>2616 N GARDEN DRIVE, #105</b> <b>LAKE WORTH FL 33461</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Ward, Katherine J.</b> <b>2724 N. Garden Dr, #304</b> <b>Lake Worth, FL 33461</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>Molly Leban</b> <b>2855 S. Garden Dr, #211</b> <b>Lake Worth, FL 33461</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>Paul Warren I.</b> <b>2855 S. Garden Dr #312</b> <b>Lake Worth, FL 33461</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Cade, Ledford</b> <b>2640 S. Garden Dr, #309</b> <b>Lake Worth, FL 33461</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>Charles G Tarkinson</b> <b>2769 S. Garden Dr, #311</b> <b>Lake Worth, FL 33461</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Perttu, Heikki</b> <b>2616 N. Garden Dr, #105</b> <b>Lake Worth, FL 33461</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Molly Leban*

**03/03/03**

**561-965-8487**

CR2E037 (10/02)

ATTACHMENT  
10035047

ADDITIONAL PAGE

DOCUMENT # 711194

LAKE CLARKE GARDENS CONDOMINIUM, INC.

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Badgley, Charles  
2812 S. Garden Drive, #311  
Lake Worth, FL 33461

D

Lucci, Joe  
2647 N. Garden Drive, #308  
Lake Worth, FL 33461

D

Murphy, John  
2640 S. Garden Drive, #306  
Lake Worth, FL 33461