

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

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90150 034 ****61.25

DOCUMENT # 741784

1. Entity Name

LAKE MANGO SHORES PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

**4811 GEORGIA AVE
WEST PALM BEACH FL 33405
US**

Mailing Address

**PO BOX 7610
WEST PALM BEACH FL 33405
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1663632**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**A.M. RESOURCES INC.
4811 GEORGIA AVE
WEST PALM BCH FL 33405**

7. Name and Address of New Registered Agent

Name
St. John, Core, Fiore & Lemme, P.A.
Street Address (P.O. Box Number is Not Acceptable)
**Centurion Tower, Suite 701
1601 Forum Place
City West Palm Beach FL Zip Code 33401**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

April 15, 2003

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

TITLE	PO	<input type="checkbox"/> Delete
NAME	TYLER, KATHY	
STREET ADDRESS	1459 LAKE MANGO WAY	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	
TITLE	TDS	<input checked="" type="checkbox"/> Delete
NAME	GUIBERT, TERESA	
STREET ADDRESS	2664 STARWOOD CIR	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GOMBERT, LINDA	
STREET ADDRESS	1467 LAKE MANGO WAY	
CITY-ST-ZIP	WEST PALM BEACH FL 33406	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUIBERT, TERESA	
STREET ADDRESS	2664 STARWOOD CIRCLE	
CITY-ST-ZIP	WEST PALM BEACH, FL 33406	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOMBERT, LINDA	
STREET ADDRESS	1467 LAKE MANGO WAY	
CITY-ST-ZIP	WEST PALM BEACH, FL 33406	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	POWELL, NATALIA	
STREET ADDRESS	2706 STARWOOD COURT	
CITY-ST-ZIP	WEST PALM BEACH, FL 33406	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROTH, PAULA	
STREET ADDRESS	2701 STARWOOD COURT	
CITY-ST-ZIP	WEST PALM BEACH, FL 33406	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Kathy Tyler
REQUIRED

4/11/03 (561)
659-7871

CR2E037 (10/02)

ATTACHMENT
741784
80055567

LAW OFFICES
ST. JOHN, CORE, FIORE & LEMME, P.A.

CENTURION TOWER, SUITE 701
1601 FORUM PLACE
WEST PALM BEACH, FLORIDA 33401

DAVID ST. JOHN
DAVID A. CORE
KEVIN J. FIORE
THERESA M. LEMME
JOSEPH JORDAN
GEORGE SCHWIND, P.A.

TELEPHONE
(561) 655-8994

TELECOPIER
(561) 659-0850

OF COUNSEL
CARI SUSSMAN PODESTA

April 15, 2003

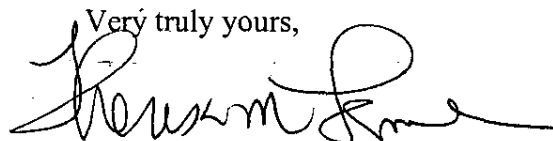
Department of State
Division of Corporations
Uniform Business Filings
Post Office Box 1500
Tallahassee, Florida 32302-1500

Re: Lake Mango Shores Property Owners' Association, Inc. / Uniform Business Report (UBR)

Dear Sir or Madam:

Enclosed please find the Uniform Business Report for Lake Mango Shores Property Owners' Association, Inc., along with check number 5021 in the amount of \$61.25 to cover the filing fee.

If you need anything further, please do not hesitate to contact me.

Very truly yours,


THERESA M. LEMME
For the Firm

TML/cfg
Enclosures
cc: Association