

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749977

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** LAKE COLONY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4003 PALM BAY CIRCLE  
WEST PALM BEACH, FL 33406 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BANYAN PROPERTY MGMT  
2328 S CONGRESS AVE SUITE 1C  
WEST PALM BEACH, FL 33406 US

**New Mailing Address:**

ASSOCIATED PROPERTY MANAGEMENT  
1928 LAKE WORTH ROAD  
LAKE WORTH, FL 33461 US

FEI Number: 59-1971312

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HARTLEY & MORTON ATTORNEYS AT LAW PA  
800 VILLAGE SQUARE CROSSING  
SUITE 222  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CAMPBELL, ELLEN M  
Address: 1928 LAKE WORTH ROAD  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: SD  
Name: CRAIG, CANDACE  
Address: 1928 LAKE WORTH ROAD  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: TD  
Name: BERNSTEIN, ALAN  
Address: 1928 LAKE WORTH ROAD  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: SD  
Name: WALL, BRENDA  
Address: 1928 LAKE WORTH ROAD  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: D  
Name: SCHWARTZ, STEVE  
Address: 1928 LAKE WORTH ROAD  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: VP  
Name: SCOTT, STEVE  
Address: 1928 LAKE WORTH  
City-St-Zip: LAKE WORTH, FL 33461 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELLEN CAMPBELL

PD

04/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date