

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05375

FILED  
Jan 20, 2010  
Secretary of State

**Entity Name:** LINCOLN SQUARE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

CREST MANAGEMENT GROUP  
6413 CONGRESS AVE, STE 200  
BOCA RATON, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

6413 CONGRESS AVE, STE 200  
BOCA RATON, FL 33487

**New Mailing Address:**

6413 CONGRESS AVE,  
SUITE 200  
BOCA RATON, FL 33487

FEI Number: 59-2501040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CREST MANAGEMENT GROUP  
6413 CONGRESS AVE SUITE 200  
BOCA RATON, FL 33487 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: MINISTER, SUE ANN  
Address: 610 LINCOLN CT  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: 2VP  
Name: CADAVID, JUAN F  
Address: 502 LINCOLN CT  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VP  
Name: NEISCHLOSS, KENNETH  
Address: 607 LINCOLN CT  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T  
Name: AHEARN, MICHELLE  
Address: 602 LINCOLN CT  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: S  
Name: ROTH, ALBERT  
Address: 402 LINCOLN COURT  
City-St-Zip: DEERFIELD BEACH, FL 33442

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: SUE ANN MINISTER

P

01/20/2010

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

\_\_\_\_\_  
Date