


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N07367 1. Entity Name THE LAKES OF PGA NATIONAL CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business COMMUNITIES MANAGEMENT CO. 300 AVE. OF THE CHAMPIONS #120 PALM BEACH GARDENS, FL 33418 US		Mailing Address COMMUNITIES MANAGEMENT CO. 300 AVE. OF THE CHAMPIONS #120 PALM BEACH GARDENS, FL 33418 US	
<i>United Community Mgt. Corp.</i>			
2. Principal Place of Business - No P.O. Box # 11784 W. Sample Rd Suite, Apt. #, etc. #103 City & State Coral Springs, FL Zip 33065 Country USA		3. Mailing Address 11784 W. Sample Rd Suite, Apt. #, etc. #103 City & State Coral Springs, FL Zip 33065 Country USA	
6. Name and Address of Current Registered Agent RABINOVITZ, HARRY 114 WATERVIEW DR WEST PALM BEACH, FL 33418		7. Name and Address of New Registered Agent Name <i>United Community Mgt. Corp.</i> Street Address (P.O. Box Number is Not Acceptable) <i>11784 W. Sample Rd #103</i> City <i>Coral Springs</i> State <i>FL</i> Zip Code <i>33065</i>	
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 <i>Denise Campbell U.P. Finance United Comm Mgmt</i> 12/16/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	VP/S	TITLE	
NAME	MORRIS, MARILYN	NAME	
STREET ADDRESS	300 AVE. OF THE CHAMPIONS #120	STREET ADDRESS	500139228805
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33418	CITY - ST - ZIP	12/23/08--01015--003 **61.25
TITLE	D	TITLE	
NAME	SCOTT, LINDA	NAME	
STREET ADDRESS	300 AVE. OF THE CHAMPIONS #120	STREET ADDRESS	
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33418	CITY - ST - ZIP	
TITLE	P/T	TITLE	
NAME	ROBINOVITZ, HARRY	NAME	
STREET ADDRESS	300 AVE. OF THE CHAMPIONS #120	STREET ADDRESS	
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33418	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <i>12/11/08</i> <small>Daytime Phone: #</small>	

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10182008 Chg-NP CR2E037 (12/06)

4. FEI Number 65-0052375 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

2012/19