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

DOCUMENT # N18875

1. Entity Name

LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4697 LUCERNE LAKES BLVD.E. LAKE WORTH FL 33467-3912	4697 LUCERNE LAKES BLVD.E. LAKE WORTH FL 33467-3912

☐ CHECK HERE IF MAKING CHANGES

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 **59-2787572**

Applied For ☐
Not Applicable ☐

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

6. Name and Address of Current Registered Agent	**7. Name and Address of New Registered Agent**
DICKER, EDWARD 1818 AUSTRALIAN AVENUE SOUTH SUITE 1400 WEST PALM BEACH FL 33409	Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code

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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   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 P NAME RAO, JOHN STREET ADDRESS 4706 LUCERNE LAKES BLVD, #206 CITY-ST-ZIP LAKE WORTH FL 33467	☐ Delete	TITLE President NAME MATTHEWS, DOROTHY STREET ADDRESS 4711 LUCERNE LAKES BLVD #104 CITY-ST-ZIP LAKE WORTH, FL 33467	☒ Change ☒ Addition
TITLE VPD NAME CHINOSI, JOHN STREET ADDRESS 4706 LUCERNE LAKES, #208 CITY-ST-ZIP LAKE WORTH FL 33467	☐ Delete	TITLE VPD NAME CHINOSI, JOHN STREET ADDRESS 4706 LUCERNE LAKES BLVD # 208 CITY-ST-ZIP LAKE WORTH, FL 33467	☐ Change ☐ Addition
TITLE S NAME MULTZ, RHODA STREET ADDRESS 4689 LUCERN LAKES BLVD CITY-ST-ZIP LAKE WORTH FL 33467	☒ Delete	TITLE S NAME DONAIS, SIDNEY STREET ADDRESS 4707 LUCERNE LAKES BLVD #103 CITY-ST-ZIP LAKE WORTH, FL 33467	☒ Change ☒ Addition
TITLE T NAME FLEMING, MARTIN STREET ADDRESS 4705 LUCERNE LAKES BLVD, #202 CITY-ST-ZIP LAKE WORTH FL 33467	☐ Delete	TITLE T NAME FLEMING, MARTIN STREET ADDRESS 4705 LUCERNE LAKES BLVD #202 CITY-ST-ZIP LAKE WORTH, FL 33467	☐ Change ☐ Addition
TITLE D NAME HAYES, PATRICK STREET ADDRESS 4691 LUCERNE LAKES BLVD, #205 CITY-ST-ZIP LAKE WORTH FL 33467	☒ Delete	TITLE D NAME RAO, JOHN STREET ADDRESS 4706 LUCERNE LAKES BLVD #206 CITY-ST-ZIP LAKE WORTH, FL 33467	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

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: _Dorothy V. Matthews_   1-29-2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #