


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # N26066					
1. Entity Name LUCERNE PARK CONDOMINIUM ASSOCIATION NO. TWELVE, INC					
Principal Place of Business 3425 JOG PK DR LAKE WORTH FL 33467 US		Mailing Address 3425 JOG PK DR LAKE WORTH FL 33467 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 65-0089586	
				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent ROSEN, JOSEPH 3447 JOG PARK DR. GREENACRES FL 33467			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating)					
SIGNATURE		DATE			
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 NAME	ROSEN, JOSEPH <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	3447 JOG PARK DRIVE	STREET ADDRESS	U00000029099		
CITY - ST - ZIP	LAKE WORTH FL 33467	CITY - ST - ZIP	02/04/04-80051-009 61.25		
TITLE NAME	FALLON, MARY <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	3421 JOG PARK DRIVE	STREET ADDRESS			
CITY - ST - ZIP	LAKE WORTH FL 33467	CITY - ST - ZIP			
TITLE NAME	BIRNBAUN, LOUIS <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	3445 JOG PARK DR	STREET ADDRESS			
CITY - ST - ZIP	LAKE WORTH FL	CITY - ST - ZIP			
TITLE NAME	NIERENBERG, MARHTA <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	3425 JOG PARK DR	STREET ADDRESS			
CITY - ST - ZIP	LAKE WORTH FL 33467	CITY - ST - ZIP			
TITLE NAME	D'IPPOLITO, JOSEPHINE <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	3427 JOG PARK DRIVE	STREET ADDRESS			
CITY - ST - ZIP	LAKE WORTH FL 33467	CITY - ST - ZIP			
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 exemption stated in Section 119.07(3)(f), 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: *Josephine D'ippolito* 1/28/04 6261969-0393