FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

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TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N02493 (7)

1. Corporation Name

LAKE WEST MEDICAL CENTRE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
C/O Touchstone Webb Mgm.
5710 S. Dixie Hwy.
Suite A
West Palm Beach, Fl 33405

Mailing Address
c/o Touchstone Webb Mgm.
5710 S. Dixie Hwy
Suite A
West Palm Beach, Fl 33405

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

4. FEI Number 59-2412819 — Applied For / Not Applicable

2. Principal Place of Business
21 c/o Touchstone Webb Mgm

2a. Mailing Address
26 c/o Touchstone Webb Mgm

Suite, Apt. #, etc.
22 5710 S. Dixie Hwy, Suite A

Suite, Apt. #, etc.
27 5710 S Dixie Hwy, Suite A

City & State
23 West Palm Beach, Fl

City & State
28 West Palm Beach, Fl

Zip
24 33405

Country
25 Palm Beach

Zip
29 33405

Country
30 Palm Beach

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required

8. *This corporation has liability for intangible tax under S. 190.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: Kathleen Webb Salata

82 Street Address (P.O. Box Number is Not Acceptable): c/o Touchstone Webb Management

83: 5710 South Dixie Hwy, Suite A

84 City: West Palm Beach, FL

85 Zip Code: 33405

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Kathleen Webb Salata — 4-17-95

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		11 TITLE	D,P ☐ Change ☐ Addition
NAME		12 NAME	Kenneth Mitchell
STREET ADDRESS		13 STREET ADDRESS	6894 Lake Worth Rd, Suite 103
CITY-ST-ZIP		14 CITY-ST-ZIP	Lake Worth, Fl 33467
TITLE		21 TITLE	D, VP ☐ Change ☐ Addition
NAME		22 NAME	Richard Lubell
STREET ADDRESS		23 STREET ADDRESS	6894 Lake Worth Road, Suite #202
CITY-ST-ZIP		24 CITY-ST-ZIP	Lake Worth, Fl 33467
TITLE		31 TITLE	D,S,T, ☐ Change ☐ Addition
NAME		32 NAME	Arthur Smith
STREET ADDRESS		33 STREET ADDRESS	6894 Lake Worth Road, Suite 201
CITY-ST-ZIP		34 CITY-ST-ZIP	Lake Worth, Fl 33467
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	TJS, 4/26/95
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	100001 46.95 PI
STREET ADDRESS		53 STREET ADDRESS	050426 C1050 005
CITY-ST-ZIP		54 CITY-ST-ZIP	****1 30.00 ****1 30.00
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] — 4/17/95 — (407) 547-4001

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

Kennet Mitchell