

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02493

FILED
Apr 27, 2005
Secretary of State

Entity Name: LAKE WEST MEDICAL CENTRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2328 S CONGRESS AVE
1-C
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

2328 S CONGRESS AVE
1-C
WEST PALM BEACH, FL 33406 US

New Mailing Address:

FEI Number: 59-2412819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSI, ROBERT R
2328 S CONGRESS AVE
1-C
WEST PALM BEACH, FL 33406 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: PD () Delete
Name: MITCHELL, KENNETH
Address: 6894 LAKE WORTH RD, SUITE 103
City-St-Zip: LAKE WORTH, FL

Title: VPD () Delete
Name: SMITH, ARTHUR
Address: 6894 LAKE WORTH RD, SUITE 201
City-St-Zip: LAKE WORTH, FL

Title: STD () Delete
Name: LIPSMAN, SAUL
Address: 6894 LAKE WORTH RD #102
City-St-Zip: LAKE WORTH, FL 33467 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KENNETH MITCHELL

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date