2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26066

FILED Jan 22, 2009 Secretary of State

Entity Name: LUCERNE PARK CONDOMINIUM ASSOCIATION NO. TWELVE, INC

Current Principal Place of Business: New Principal Place of Business: 3429 JOG PARK DR LAKE WORTH, FL 33467 US **Current Mailing Address: New Mailing Address:** 3429 JOG PARK DR LAKE WORTH, FL 33467 US FEI Number: 65-0089586 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DITTMYRE, ROBERT H DITTMYRE, ROBERT H PRES. 3429 JOG PARK DR 3429 JOG PARK DR GREENACRES, FL 33467 US GREENACRES, FL 33467 US 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: ROBERT DITTMYRE 01/22/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DITTMYRE, ROBERT Name: Name: 3429 JOG PARK DR Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FALLON, MARY Name: Address: 3421 JOG PARK DRIVE Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: (X) Change () Addition BIRNBAUN, LOUIS Name: BIRNBAUN, LOUIS Name: 3445 JOG PARK DR Address: Address: 3445 JOG PARK DR City-St-Zip: LAKE WORTH, FL City-St-Zip: LAKE WORTH, FL 33467 Title: () Delete Title: () Change () Addition D'IPPOLITO, JOSEPHINE Name: Name: 3427 JOG PARK DRIVE Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: (X) Change () Addition FANTANA, ANITA FANTANA, ANITA Name: Name: 2481 JOE PARK DR. 2481 JOG PARK DR. Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROBERT DITTMYRE PRES 01/22/2009