

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709386

Entity Name: LOST TREE CONDOMINIUM COTTAGES, INC.

Current Principal Place of Business:

11589 LOST TREE WAY
N PALM BEACH, FL 34408

Current Mailing Address:

P O. BOX 14812
N PALM BEACH, FL 34408 US

FEI Number: 59-1914489

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JORGENSEN, JOHN M
4400 PGA BLVD
SUITE 603
PALM BEACH GARDENS, FL 33410 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: JOHN M. JORGENSEN

04/26/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name JARIS, JUDY
Address 11589 LOST TREE WAY
City-State-Zip: NORTH PALM BEACH FL 33408

Title AS, ASST. SECRETARY
Name KANE, BRIAN
Address P.O BOX 14812
City-State-Zip: NORTH PALM BEACHNS FL 33408

Title VP
Name MAGEE, SUSAN
Address 11645 LOST TREE WAY
City-State-Zip: NORTH PALM BEACH FL 33408

Title SECRETARY, TREASURER
Name SAVARD, ODETTE
Address 11639 LOST TREE WAY
City-State-Zip: NORTH PALM BEACH FL 33408

I hereby 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 all other like empowered.

SIGNATURE: BRIAN KANE

AS

04/26/2017

Electronic Signature of Signing Officer/Director Detail

Date