

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 716238

**Entity Name:** LAKE HOUSE SOUTH ASSOCIATION, INC.**Current Principal Place of Business:**875 E. CAMINO REAL  
BOCA RATON, FL 33432**Current Mailing Address:**875 E. CAMINO REAL  
BOCA RATON, FL 33432**FEI Number:** 59-1311341**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SACHS SAX CAPLAN  
875 E. CAMINO REAL  
BOCA RATON, FL 33432 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:** LOU CAPLAN

04/25/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           MARGOLIS, DAVID  
Address        875 E CAMINO REAL 14E  
City-State-Zip: BOCA RATON FL 33432

Title            DIRECTOR  
Name           GIARRUSSO, LAUREL  
Address        875 E CAMINO REAL 16H  
City-State-Zip: BOCA RATON FL 33432

Title            TREASURER  
Name           RUBEL, ROBERT  
Address        875 E. CAMINO REAL  
                    15G  
City-State-Zip: BOCA RATON FL 33432

Title            SECRETARY  
Name           SCHANTZ, MICHAEL  
Address        875 E CAMINO REAL  
                    3A  
City-State-Zip: BOCA RATON FL 33432

Title            DIRECTOR  
Name           SLATER, DAVID  
Address        875 E CAMINO REAL  
                    12B  
City-State-Zip: BOCA RATON FL 33432

Title            VP  
Name           SILVERMAN, JULIE  
Address        875 E CAMINO REAL  
                    9A  
City-State-Zip: BOCA RATON FL 33432

Title            DIRECTOR  
Name           LIEN, ROBERT  
Address        875 E CAMINO REAL  
                    7D  
City-State-Zip: BOCA RATON FL 33432

*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:** DAVID MARGOLIS

PRESIDENT

04/25/2023

Electronic Signature of Signing Officer/Director Detail

Date