

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717873

**Entity Name:** LINCOLN BAY TOWERS ASSOCIATION, INC.**Current Principal Place of Business:**1450 LINCOLN ROAD  
OFFICE  
MIAMI BEACH, FL 33139**Current Mailing Address:**9600 N.W. 25 ST. #5D  
DORAL, FL 33172 US**FEI Number:** 59-1283008**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**J&M CONDO MANAGEMENT INC.  
9600 N.W. 25 STREET  
SUITE 5-D  
DORAL, FL 33172 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	STROIA, RONALD
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

Title	VD
Name	KANTOR, MICHAEL
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

Title	TD
Name	SOLISH, LOUIS M
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

Title	D
Name	CONTE, RICHARD
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

Title	D
Name	DUKE, ROBERT
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

Title	D
Name	LAWRENCE, LINDA
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

Title	SECRETARY
Name	PLOEHN, ROBERT
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

Title	DIRECTOR
Name	LIPMAN, SUSAN
Address	9600 N.W. 25 ST. #5D
City-State-Zip:	DORAL FL 33172

**Continues on page 2**

*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: RONALD STROIA****PRESIDENT****04/28/2015**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 YOUNG, ALLEN  
Address             9600 N.W. 25 ST. #5D  
City-State-Zip:   DORAL FL 33172

Title                   DIRECTOR  
Name                 LENETT, SARAH  
Address             9600 N.W. 25 ST. #5D  
City-State-Zip:   DORAL FL 33172