

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719641

Entity Name: LANDS END CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**44 YACHT CLUB DR
NORTH PALM BEACH, FL 33408**Current Mailing Address:**44 YACHT CLUB DR
#309
NORTH PALM BEACH, FL 33408 US**FEI Number:** 59-1372937**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CILCIUS, FLORENCE
44 YACHT CLUB DR.
#309
NORTH PALM BEACH, FL 33408 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	PRESIDENT
Name	SEIDMAN, FRANK
Address	36 YACHT CLUB DR. #403
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR
Name	STARKIE, ROBERT
Address	44 YACHT CLUB DR. #207
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR
Name	SKOP, LENNY
Address	44 YACHT CLUB DR. #410
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	DIRECTOR
Name	SCHWEIGHARDT, SAM
Address	44 YACHT CLUB DR. APT #305
City-State-Zip:	N PALM BEACH FL 33408

Title	TREASURER
Name	CILCIUS, FLORENCE
Address	44 YACHT CLUB DR. #309
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	OFFICER, SECRETARY
Name	O'BRIEN, DENNY
Address	36 YACHT CLUB DR. #403
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	OFFICER, ASST. SECRETARY
Name	GLAESER, DALE
Address	36 YACHT CLUB DR. #104
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: FLORENCE CILCIUS**TREASURER****03/06/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date