

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743289

Entity Name: LAKEVIEW CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

3101 LAKEVIEW BLVD
DELRAY BEACH, FL 33445

Current Mailing Address:

3101 LAKEVIEW BLVD
DELRAY BEACH, FL 33445 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, ELINOR
3101 LAKEVIEW BLVD
DELRAY BEACH, FL 33445 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: ELINOR WILLIAMS

03/10/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BELDEN, JENNIFER
Address 3602 LAKEVIEW BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title TREASURER
Name WILLIAMS, ELINOR
Address 3101 LAKEVIEW BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title SECRETARY
Name KITTL, RACHEL
Address 3590 LAKEVIEW DRIVE
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name KELLY, MARK
Address 3501 LAKEVIEW BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title VP
Name FREEMAN, LYNNE
Address 3225 LAKEVIEW DR
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name BACON, SOPHIA
Address 3544 LAKEVIEW BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name GOEBERT, BONNIE
Address 3410 LAKEVIEW BLVD
City-State-Zip: DELRAY BEACH FL 33445

Title DIRECTOR
Name DELGADO, MIRIAM
Address 3129 LAKEVIEW DR
City-State-Zip: DELRAY BEACH FL 33445

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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: ELINOR WILLIAMS

TREASURER

03/10/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SHER, MARTIN
Address 3589 LAKEVIEW DR
City-State-Zip: DELRAY BEACH FL 33445