

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749801

**Entity Name:** PARK LANE CONDOMINIUM OWNERS ASSOCIATION, INC.

**FILED**  
**Jan 14, 2020**  
**Secretary of State**  
**4722850350CC**

**Current Principal Place of Business:**

8437 TUTTLE AVE.  
#376  
SARASOTA, FL 34243

**Current Mailing Address:**

8437 TUTTLE AVE.  
#376  
SARASOTA, FL 34243 US

**FEI Number: 59-1961149**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JAMES, FAIX M  
8437 TUTTLE AVE  
#376  
SARASOTA, FL 34243 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 SECRETARY  
Name BARROW, DOTTY  
Address 8437 TUTTLE AVE.  
#376  
City-State-Zip: SARASOTA FL 34243

Title TREASURER  
Name PIPER, SANDY  
Address 8437 TUTTLE AVE.  
#376  
City-State-Zip: SARASOTA FL 34243

Title VP, DIRECTOR  
Name SILVERMINTZ, LARRY  
Address 8437 TUTTLE AVE.  
#376  
City-State-Zip: SARASOTA FL 34243

Title PRESIDENT  
Name LAMPHIER, JOHN  
Address 8437 TUTTLE AVE.  
#376  
City-State-Zip: SARASOTA FL 34243

Title DIRECTOR  
Name DICKINSON, HIRAM  
Address 8437 TUTTLE AVE.  
#376  
City-State-Zip: SARASOTA FL 34243

Title ASST. SECRETARY  
Name FAIX, JAMES M  
Address 8437 TUTTLE AVE.  
#376  
City-State-Zip: SARASOTA FL 34243

*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: JAMES M FAIX**

**AST SECY**

**01/14/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date