## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 749977** 

Entity Name: LAKE COLONY HOMEOWNERS ASSOCIATION, INC.

FILED Apr 14, 2020 Secretary of State 3476720121CC

# **Current Principal Place of Business:**

1818 S AUSTRALIAN AVE STE 400

WEST PALM BEACH, FL 33409

# **Current Mailing Address:**

ASSOCIATED PROPERTY MANAGEMENT 8135 LAKE WORTH RD., SUITE B LAKE WORTH, FL 33467 US

FEI Number: 59-1971312 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

STOLOFF & MANOFF, PA 1818 S. AUSTRALIAN AVE STE 400 WEST PALM BEACH, FL 33409 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: SCOTT STOLOFF, ESQ

04/14/2020

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

City-State-Zip:

Title	PRESIDENT	Title	SECRETARY
Name	SCOTT, STEVE	Name	WALL, BRENDA

Address 8135 LAKE WORTH RD.,

SUITE B

Address 8135 LAKE WORTH RD.,

SUITE B

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title TREASURER Title DIRECTOR

Name BERNSTEIN, ALAN Name DIAMOND, ELAINE

Address 8135 LAKE WORTH RD., Address 8135 LAKE WORTH RD.,

SUITE B SUITE B

LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR Title DIRECTOR

Name DANIELS, BARON Name CAMPBELL, ELLEN

Address 8135 LAKE WORTH RD., Address 8135 LAKE WORTH RD.,

SUITE B SUITE B

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Electronic Signature of Signing Officer/Director Detail

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.