

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 758068

**Entity Name:** LCL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

200 W PALMETTO PARK ROAD  
#302  
BOCA RATON, FL 33432

**Current Mailing Address:**

200 W PALMETTO PARK ROAD  
#302  
BOCA RATON, FL 33432 US

**FEI Number: 59-2168956**

**Certificate of Status Desired: No**

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

WARD DAMON BUSINESS SERVICES, LLC  
4420 BEACON CIRCLE  
WEST PALM BEACH, FL 33407 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:** /MICHAEL J POSNER

09/12/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LAMBERT , JEREMY  
Address        200 W PALMETTO PARK ROAD  
                  #302  
City-State-Zip: BOCA RATON FL 33432

Title            VP  
Name            LAMBERT, BRIAN  
Address        200 W PALMETTO PARK RD  
                  #302  
City-State-Zip: BOCA RATON FL 33432

Title            DIRECTOR  
Name            PROPER, SETH  
Address        200 W PALMETTO PARK ROAD  
                  #302  
City-State-Zip: BOCA RATON FL 33432

Title            DIRECTOR  
Name            LAMBERT, BRIAN  
Address        200 W PALMETTO PARK RD  
                  #302  
City-State-Zip: BOCA RATON FL 33432

Title            DIRECTOR  
Name            HERNANDEZ, CELIA  
Address        200 W PALMETTO PARK ROAD  
                  #302  
City-State-Zip: BOCA RATON FL 33432

Title            SECRETARY, TREASURER  
Name            HERNANDEZ, CELIA  
Address        200 W PALMETTO PARK ROAD  
                  #302  
City-State-Zip: BOCA RATON FL 33432

*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:** CELIA HERNANDEZ

**SECRETARY**

09/12/2014

Electronic Signature of Signing Officer/Director Detail

Date