

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759569

Entity Name: LAKESHORE COLONY MASTER ASSOCIATION, INC.**Current Principal Place of Business:**41 S LAKESHORE DR
HYPOLUXO, FL 33462**Current Mailing Address:**C/O QUALITY MANAGEMENT GROUP, INC
6600 WEST ROGERS CIRCLE SUITE 101
BOCA RATON, FL 33487 US**FEI Number:** 59-2266151**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GELFAND & ARPE, P. A.
1555 PALM BEACH LAKES BLVD.
SUITE 1220
WEST PALM BCH, FL 33401 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 WEBB, GARY
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 6600 WEST ROGERS CIRCLE SUITE
 101
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name HESSION, JERRY
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 6600 WEST ROGERS CIRCLE SUITE
 101
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name SIECZKOWSKI, PAUL
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 6600 WEST ROGERS CIRCLE SUITE
 101
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name WILLIAMS, MICHAEL
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 6600 WEST ROGERS CIRCLE SUITE
 101
City-State-Zip: BOCA RATON FL 33487

Title SECRETARY
Name JANKA, ROBIN
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 6600 WEST ROGERS CIRCLE SUITE
 101
City-State-Zip: BOCA RATON FL 33487

Title VP
Name BROWN, CHASE
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 6600 WEST ROGERS CIRCLE SUITE
 101
City-State-Zip: BOCA RATON FL 33487

Title TREASURER
Name HOLLAND, WILLIS (BUCK)
Address C/O QUALITY MANAGEMENT GROUP,
 INC
 6600 WEST ROGERS CIRCLE SUITE
 101
City-State-Zip: BOCA RATON FL 33487

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: GARY WEBB

PRESIDENT

03/26/2019

Electronic Signature of Signing Officer/Director Detail

Date