

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759695

Entity Name: LONE PINE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4371 NORTHLAKE BLVD. #301
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

4371 NORTHLAKE BLVD. #301
PALM BEACH GARDENS, FL 33410 US

FEI Number: 90-0113615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LONE PINE ESTATES HOMOWERS ASSOCIATION INC
4371 NORTHLAKE BLVD. #301
PALM BEACH GARDENS, FL 33410 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: SUSAN M BROWN

06/12/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR / AT-LARGE
Name BAKER-HUGHES, ROCHELLE
Address 206 LOCHMORE ROAD
City-State-Zip: WEST PALM BEACH FL 33407

Title TREASURER
Name MERRELL, LYNN
Address 110 CHAMPIONS RUN
City-State-Zip: WEST PALM BEACH FL 33407

Title SECRETARY
Name WALKER, ODESSA
Address 210 LOCHMORE ROAD
City-State-Zip: WEST PALM BEACH FL 33407

Title PRESIDENT
Name BLACKSHEAR, CLARISSA
Address 310 CANTERBURY DRIVE WEST
City-State-Zip: WEST PALM BEACH FL 33407

Title VP
Name WOLITICH, WILLIAM
Address 2547 CANTERBURY DRIVE NORTH
City-State-Zip: WEST PALM BEACH FL 33407

Title DIRECTOR / AT-LARGE
Name MORGAN, LORETTA
Address 821 NIEMAN DRIVE
City-State-Zip: PALM BEACH GARDENS FL 33410

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: LYNN MERRELL

TREASURER

06/12/2017

Electronic Signature of Signing Officer/Director Detail

Date