

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05375

**Entity Name:** LINCOLN SQUARE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 24, 2017**  
**Secretary of State**  
**CC9196531492**

**Current Principal Place of Business:**

C/O LUXE PROPERTY MANAGEMENT  
1800 W. HILLSBORO BLVD. SUITE 214  
DEERFIELD BEACH, FL 33442

**Current Mailing Address:**

C/O LUXE PROPERTY MANAGEMENT  
1800 W. HILLSBORO BLVD. SUITE 214  
DEERFIELD BEACH, FL 33442 US

**FEI Number: 59-2501040**

**Certificate of Status Desired: No**

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

MIRZA BASULTO & ROBBINS, LLP  
14160 NW 77 CT. STE. 22  
MIAMI LAKES, FL 33016 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: RUSSELL M. ROBBINS, LLP**

**03/24/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT/TREASURER  
Name            ISAACS, JOYCE  
Address        C/O LUXE PROPERTY MANAGEMENT  
                  1800 W. HILLSBORO BLVD. SUITE 214  
City-State-Zip: DEERFIELD BEACH FL 33442

Title            SECRETARY  
Name            TOSAR, AURORA A  
Address        C/O LUXE PROPERTY SERVICES  
                  1800 W. HILLSBORO BLVD. SUITE 214  
City-State-Zip: DEERFIELD BEACH FL 33442

Title            VP  
Name            MENCHI, JOSEPH  
Address        C/O LUXE PROPERTY MANAGEMENT  
                  1800 W. HILLSBORO BLVD. SUITE 214  
City-State-Zip: DEERFIELD BEACH FL 33442

Title            DIRECTOR  
Name            COLLINS, KEVIN P  
Address        C/O LUXE PROPERTY MANAGEMENT  
                  1800 W. HILLSBORO BLVD. SUITE 214  
City-State-Zip: DEERFIELD BEACH FL 33442

Title            DIRECTOR  
Name            FALCONE, NICHOLAS A  
Address        C/O LUXE PROPERTY MANAGEMENT  
                  1800 W. HILLSBORO BLVD. SUITE 214  
City-State-Zip: DEERFIELD BEACH FL 33442

*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: JOYCE ISAACS**

**PRESIDENT**

**03/24/2017**

Electronic Signature of Signing Officer/Director Detail

Date