

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004443

Entity Name: AMASON CONDOMINIUMS, INC.**Current Principal Place of Business:**1000 10TH AVE. SOUTH
LAKE WORTH, FL 33460**Current Mailing Address:**P.O. BOX 290
LAKE WORTH, FL 33460 US**FEI Number:** 26-1351749**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TORVELA, ARTHUR
430 SO. C ST.
LAKE WORTH, FL 33460 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	P
Name	LINDSEY, THOMAS
Address	927 SO. G ST. #1
City-State-Zip:	LAKE WORTH FL 33460

Title	SD
Name	LINDSEY, ANNE
Address	927 SO G ST #1
City-State-Zip:	LAKE WORTH FL 33460

Title	D
Name	TORVELA, ARTHUR
Address	430 SO C ST
City-State-Zip:	LAKE WORTH FL 33460

Title	V
Name	ST PRUEX, WILLIANE
Address	1315 NO. K ST.
City-State-Zip:	LAKE WORTH FL 33460

Title	T
Name	NG, TECK S
Address	1000 10TH AVE SO #2
City-State-Zip:	LAKE WORTH FL

Title	D
Name	BUCKO, ATTILA
Address	9850 SCRIBNER LANE
City-State-Zip:	WELLINGTON FL 33414

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: ANNE LINDSEY

S

04/23/2013

Electronic Signature of Signing Officer/Director Detail_____
Date