

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002639

Entity Name: LAWNWOOD MEDICAL PARK CONDOMINIUM ASSOCIATION, INC.

FILED
Feb 28, 2018
Secretary of State
CC3079449938

Current Principal Place of Business:

1700 S 23RD STREET
FT PIERCE, FL 34950

Current Mailing Address:

1800 S. AUSTRILAN AVENUE
SUITE 102
WEST PALM BEACH, FL 33409 US

FEI Number: 27-0288546

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINCOLN HARRIS CSG
1800 S. AUSTRILAN AVENUE
SUITE 102
WEST PALM BEACH, FL 33409 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 KOYAMA, TAKASHI
Address 2402 FRIST BLVD, SUITE 100
City-State-Zip: FORT PIERCE FL 34954

Title VP
Name PATTERSON , MICHAEL
Address 1700 S. 23RD STREET
City-State-Zip: FORT PIERCE FL 34954

Title SECRETARY
Name HERNANDEZ, JALIMA
Address 1700 S. 23RD STREET
City-State-Zip: FORT PIERCE FL 34954

Title PROPERTY MANAGER - AUTHORIZED
 REPRESENTATIVE
Name LIEBERMAN, VICTORIA
Address 1800 S AUSTRALIAN AVENUE
 SUITE 102
City-State-Zip: WEST PALM BEACH FL 33409

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: VICTORIA LIEBERMAN

PROPERTY MANAGER

02/28/2018

Electronic Signature of Signing Officer/Director Detail

Date