

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13205

Entity Name: LUCERNE PARK CONDOMINIUM ASSOCIATION NO. SEVEN, INC.**FILED**
Feb 10, 2016
Secretary of State
CC7881399777**Current Principal Place of Business:**3331 PERIMETER DRIVE
BUILDING 15
GREENACRES, FL 33467**Current Mailing Address:**3331 PERIMETER DRIVE
BUILDING 15
GREENACRES, FL 33467 US**FEI Number: 59-2772173****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ARONSON, DOROTHEA
3338 PERIMETER DR
GREENACRES, FL 33467 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	DIRECTOR
Name	FELDMAN, PEARL
Address	3341 PERIMETER DRIVE
City-State-Zip:	GREENACRES FL 33467

Title	DIRECTOR
Name	RUIZ, MIRIAM
Address	3342 PERIMETER DRIVE
City-State-Zip:	GREENACRES FL 33467

Title	PRESIDENT, SECRETARY
Name	REDDY, MARIE
Address	3331 PERIMETER DRIVE
City-State-Zip:	GREENACRES FL 33467

Title	VP
Name	BAYRON, MAGUIE
Address	3336 PERIMETER DRIVE
City-State-Zip:	GREENACRES FL 33467

Title	DIRECTOR
Name	CANNARELLA, ROBERT
Address	3325 PERIMETER DRIVE
City-State-Zip:	GREENACRES FL 33467

Title	TRUEASURER
Name	BILENAS, ANDY
Address	3337 PERIMETER DRIVE BUILDING 14
City-State-Zip:	GREENACRES FL 33467

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: MARIE REDDY**PRESIDENT****02/10/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date