

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18875

Entity Name: LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4697 LUCERNE LAKES BLVD EAST
LAKE WORTH, FL 33467

Current Mailing Address:

C/O SEACREST SERVICES, INC.
2400 CENTREPARK WEST DR. SUITE 175
W. PALM BEACH, FL 33409 US

FEI Number: 59-2787572

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DICKER, KRIVOK & STOLOFF, P.A.
1818 AUSTRALIAN AVENUE SOUTH
SUITE 400
W. 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: EDWARD DICKER

04/04/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P/T
Name PRODAN, KATHLEEN
Address 4697 LUCERNE LAKES BLVD EAST
City-State-Zip: LAKE WORTH FL 33467

Title VP/S
Name SCHEFFERMAN, JULIAN
Address 4697 LUCERNE LAKES BLVD EAST
City-State-Zip: LAKE WORTH FL 33467

Title D
Name FLEMING, MARTIN
Address 4697 LUCERNE LAKES BLVD EAST
City-State-Zip: LAKE WORTH FL 33467

Title D
Name MUDGE, TERRY
Address 4697 LUCERNE LAKES BLVD EAST
City-State-Zip: LAKE WORTH FL 33467

Title D
Name ILLUZZI, JOHN
Address 4697 LUCERNE LAKES BLVD EAST
City-State-Zip: LAKE WORTH 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: KATHLEEN PRODAN

PRESIDENT

04/04/2014

Electronic Signature of Signing Officer/Director Detail

Date