#### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18875

Entity Name: LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 26, 2013
Secretary of State
CC2195531996

# **Current Principal Place of Business:**

C/O A&G MANAGEMENT SERVICES 3132 FORTUNE WAY SUITE D-27 WELLINGTON, FL 33414

# **Current Mailing Address:**

C/O A&G MANAGEMENT SERVICES 3132 FORTUNE WAY SUITE D-27 WELLINGTON, FL 33414 US

FEI Number: 59-2787572 Certificate of Status Desired: No

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

A & G MANAGEMENT SERVICES 3132 FORTUNE WAY SUITE D-27 WELLINGTON, FL 33414 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 DP Title DVPS

Name PRODAN, KATHLEEN Name SCHEFFERMAN, JULIAN

Address 3132 FORTUNE WAY Address 3132 FORTUNE WAY

SUITE D-27 SUITE D-27

City-State-Zip: WELLINGTON FL 33414 City-State-Zip: WELLINGTON FL 33414

Title D Title D

Name FLEMING, MARTIN Name MUDGE, TERRY

Address 3132 FORTUNE WAY Address 3132 FORTUNE WAY

SUITE D-27 SUITE D-27

City-State-Zip: WELLINGTON FL 33414 City-State-Zip: WELLINGTON FL 33414

Title D

Name BOGDONOFF, LENNY
Address 3132 FORTUNE WAY

SUITE D-27

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: KATHLEEN PRODAN

**PRESIDENT** 

04/26/2013