

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18975

**FILED
Apr 21, 2014
Secretary of State
CC7961773353**

Entity Name: LAKEVIEW MEDICAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

700 2ND AVE N
NAPLES, FL 34102

Current Mailing Address:

C/O KOVA PROPERTY MANAGEMENT, LLC
P.O. BOX 10608
NAPLES, FL 34101 US

FEI Number: 59-2795526

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOVA PROPERTY MANAGEMENT, LLC
1250 TAMiami TRAIL N, SUITE 101
NAPLES, FL 34102 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: ANTHONY EMMA

04/21/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY, TREASURER
Name ZONAS, JAMES
Address 700 2ND AVENUE NORTH #102
City-State-Zip: NAPLES FL 34102

Title VPD
Name WEIDNER, EDMUND DR.
Address 700 2ND AVENUE N #205
City-State-Zip: NAPLES FL 34102

Title PRESIDENT
Name CASE, PATRICE DR.
Address 700 2ND AVENUE N #201
City-State-Zip: NAPLES FL 34102

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: DR PATRICE CASE

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04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date