## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18975

Entity Name: LAKEVIEW MEDICAL PLAZA CONDOMINIUM ASSOCIATION,

INC.

FILED
Apr 09, 2015
Secretary of State
CC5978158588

## **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 04/09/2015

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title SECRETARY, TREASURER Title PRESIDENT

 Name
 ZONAS, JAMES
 Name
 CASE, PATRICE DR.

 Address
 700 2ND AVENUE NORTH #102
 Address
 700 2ND AVENUE N #201

 City-State-Zip:
 NAPLES FL 34102
 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.

Electronic Signature of Signing Officer/Director Detail