#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002800

Entity Name: WEST LAKE VILLAGE HOMEOWNERS' ASSOCIATION, INC.

FILED Feb 23, 2024 Secretary of State 0751732484CC

# **Current Principal Place of Business:**

1200 LEMONWOOD STREET HOLLYWOOD. FL 33019

# **Current Mailing Address:**

1200 LEMONWOOD STREET HOLLYWOOD , FL 33019 US

FEI Number: 65-0444578 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

PETERS & PETERS, P.A. ATTN: KEVIN G. PETERS, ESQ. 10400 GRIFFIN ROAD SUITE 108 COOPER CITY, FL 33328 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: /S/KEVIN G. PETERS, ESQ.

02/23/2024

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

| Title           | PRESIDENT             | Title           | VICE-PRESIDENT     |
|-----------------|-----------------------|-----------------|--------------------|
| Name            | COLLINS, WALTER J.    | Name            | MATHIOT, LAURENCE  |
| Address         | 1200 LEMONWOOD STREET | Address         | 1200 LEMONWOOD ST  |
| City-State-Zip: | HOLLYWOOD FL 33019    | City-State-Zip: | HOLLYWOOD FL 33019 |

TitleTREASURERTitleSECRETARYNameNEVES, WILSON L.NamePINERA, JUAN M.

Address 1200 LEMONWOOD STREET Address 1200 LEMONWOOD STREET

City-State-Zip: HOLLYWOOD FL 33019

City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR Title DIRECTOR

Name SIMON, LESTER Name LORBER, JONATHAN

Address 1200 LEMONWOOD STREET Address 1200 LEMONWOOD STREET

City-State-Zip: HOLLYWOOD FL 33019 City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR Title DIRECTOR

Name SCHNORF, JANELLE Name RAMOS, ALBERT

Address 1200 LEMONWOOD STREET Address 1200 LEMONWOOD STREET

City-State-Zip: HOLLYWOOD FL 33019

City-State-Zip: HOLLYWOOD FL 33019

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: WALTER J. COLLINS

**PRESIDENT** 

02/23/2024