

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N93000002800

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

**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:**

KOPELOWITZ OSTROW, P.A.  
ONE WEST LAS OLAS BLVD  
SUITE 500  
FORT LAUDERDALE, FL 33301 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:** JOSHUA KRUT

04/10/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title            VICE-PRESIDENT  
Name           MATHIOT, LAURENCE  
Address        1200 LEMONWOOD ST  
City-State-Zip: HOLLYWOOD FL 33019

Title            SECRETARY  
Name           PINERA, JUAN M  
Address        1200 LEMONWOOD STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title            TREASURER  
Name           NEVES, WILSON L  
Address        1200 LEMONWOOD STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title            DIRECTOR  
Name           SIMON, LESTER  
Address        1200 LEMONWOOD STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title            DIRECTOR  
Name           LORBER, JONATHAN  
Address        1200 LEMONWOOD STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title            DIRECTOR  
Name           RAMOS, ALBERT  
Address        1200 LEMONWOOD STREET  
City-State-Zip: HOLLYWOOD FL 33019

Title            DIRECTOR  
Name           SCHNORF, JANELLE  
Address        1200 LEMONWOOD STREET  
City-State-Zip: HOLLYWOOD FL 33019

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*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**

04/10/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	BURDICK, MICHAEL
Address	1460 SWEETBAY WAY
City-State-Zip:	HOLLYWOOD FL 33019