

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000001293

**Entity Name:** LEMON BAY VIEW EAST CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 06, 2015**  
**Secretary of State**  
**CC2061709456**

**Current Principal Place of Business:**

53 W. BAY HEIGHTS AVE  
ENGLEWOOD, FL 34223

**Current Mailing Address:**

53 W. BAY HEIGHTS AVE  
ENGLEWOOD, FL 34223 US

**FEI Number: 59-2313606**

**Certificate of Status Desired: No**

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

KIMBALL, NANCY  
SUNSHINE CAM  
PO BOX 2146  
ENGLEWOOD, FL 34295-2146 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: NANCY KIMBALL**

**03/06/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            LUSSENDEN, SUSAN  
Address        53 W. BAY HEIGHTS AVE  
                  UNIT 205  
City-State-Zip: ENGLEWOOD FL 34223

Title            VP, DIRECTOR  
Name            HUDSON, ELMER  
Address        53 W. BAY HEIGHTS AVE  
                  UNIT 301  
City-State-Zip: ENGLEWOOD FL 34223

Title            SECRETARY, TREASURER,  
                  DIRECTOR  
Name            BARTHA, JOSEPHINE  
Address        53 W. BAY HEIGHTS AVE  
                  UNIT 207  
City-State-Zip: ENGLEWOOD FL 34223

Title            DIRECTOR  
Name            GRIFFITH, BUD  
Address        53 W. BAY HEIGHTS AVE  
                  UNIT 203  
City-State-Zip: ENGLEWOOD FL 34223

Title            DIRECTOR  
Name            MICKUNAS, DENNIS  
Address        53 W. BAY HEIGHTS AVE  
                  UNIT 206  
City-State-Zip: ENGLEWOOD FL 34223

*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: ELMER HUDSON**

**VICE-PRESIDENT**

**03/06/2015**

Electronic Signature of Signing Officer/Director Detail

Date