

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006007

Entity Name: LAKE WORTH'S COLLEGE PARK HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**COLLEGE PARK
LAKE WORTH BEACH, FL 33460**Current Mailing Address:**308 DARTMOUTH DRIVE
LAKE WORTH BEACH, FL 33460 US**FEI Number: 65-0717000****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WILEY, LAUREL
308 DARTMOUTH DRIVE
LAKE WORTH BEACH, FL 33460 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: LAUREL WILEY****04/01/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	SETO, LINDY
Address	316 PRINCETON DRIVE
City-State-Zip:	LAKE WORTH BEACH FL 33460

Title	VP
Name	WILEY, LAUREL
Address	308 DARTMOUTH DR
City-State-Zip:	LAKE WORTH BEACH FL 33460

Title	SECRETARY
Name	ABBOTT, EMILY
Address	136 HARVARD DR
City-State-Zip:	LAKE WORTH BEACH FL 33460

Title	TREASURER
Name	MAY, MICHELE
Address	167 YALE DRIVE
City-State-Zip:	LAKE WORTH BEACH FL 33460

Title	DIRECTOR
Name	DEAN-ANDREWS, MICHAEL
Address	330 DARTMOUTH DRIVE
City-State-Zip:	LAKE WORTH BEACH FL 33460

Title	DIRECTOR
Name	PACE, CARA
Address	326 DARTMOUTH DR
City-State-Zip:	LAKE WORTH BEACH FL 33460

Title	DIRECTOR
Name	ROUSE, KRISTINE
Address	151 YALE DR
City-State-Zip:	LAKE WORTH BEACH FL 33460

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: LAUREL WILEY**VICE PRESIDENT****04/01/2019**

Electronic Signature of Signing Officer/Director Detail

Date