

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 443746

**Entity Name:** WEST LAKES OF BOCA RATON, INC.**Current Principal Place of Business:**8279 EAST CLUB ROAD  
BOCA RATON, FL 33433**Current Mailing Address:**8279 EAST CLUB ROAD  
BOCA RATON, FL 33433 US**FEI Number:** 59-1538634**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SANDERS, DONNA TREASURER  
8333 EAST CLUB ROAD  
BOCA RATON, FL 33433 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:** DONNA SANDERS

03/22/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name BRIGHTLY, JUDI  
Address 8421 EAST CLUB ROAD  
City-State-Zip: BOCA RATON FL 33433

Title PRESIDENT  
Name JEFFORD, JANET  
Address 8360 EAST CLUB ROAD  
City-State-Zip: BOCA RATON FL 33433

Title VP  
Name LITZ, GREG  
Address 8389 CHISUM TRAIL  
City-State-Zip: BOCA RATON FL 33433

Title TREASURER  
Name SANDERS, DONNA  
Address 8333 EAST CLUB ROAD  
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR  
Name LAPHAM, SUSAN  
Address 8300 EAST CLUB ROAD  
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR  
Name ARCHAMBAULT, PAUL  
Address 8256 EAST CLUB ROAD  
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR  
Name CUNSOLO, MARIA  
Address 8366 SOUTH STREET  
City-State-Zip: BOCA RATON FL 33433

Title DIRECTOR  
Name LEWIS, MIKE  
Address 20934 SUNRISE DRIVE  
City-State-Zip: BOCA RATON FL 33433

**Continues on page 2**

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DONNA SANDERS

TREASURER

03/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	CANDICE , BUSHEY
Address	8242 SOUTH STREET
City-State-Zip:	BOCA RATON FL 33433