

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741773

FILED  
Apr 07, 2010  
Secretary of State

**Entity Name:** GREEN LAKES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

11280 GREEN LAKE DR, 203  
BOYNTON BCH, FL 33437

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SEACREST SERVICES, INC.  
2400 CENTREPARK W DR., SUITE 175  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

C/O SEACREST SERVICES, INC.  
2400 CENTREPARK W DR., SUITE 175  
WEST PALM BEACH, FL 33409 US

**FEI Number:** 59-1916077

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DICKER, KRIVOK & STOLOFF, P.A.  
1818 AUSTRALIAN AVE. SOUTH  
SUITE 400  
WEST PALM BEACH, FL 33409 US

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MUCHNICK, BARRY  
Address: 11161 GREEN LAKE DR 201  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: VP  
Name: NEIDERMAN, CLAYTON  
Address: 11172 GREEN LAKE DRIVE #103  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: T  
Name: WEINGOLD, MAURICE  
Address: 11234 GREEN LAKE DRIVE #202  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: P  
Name: LESSER, DAVID J  
Address: 11280 GREEN LAKE DR #203  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: S  
Name: WOLF, BARBARA  
Address: 11172 GREEN LAKE DR #203  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: D  
Name: KAUFMAN, MARVIN  
Address: 11135 GREEN LAKE DR. #103  
City-St-Zip: BOYNTON BEACH, FL 33437 US

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: MARTHA OLDS

MS

04/07/2010

Electronic Signature of Signing Officer or Director

Date