

2008 NON-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # 745363

1. Entity Name
LAGO WEST HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442**

Mailing Address
**P.O. BOX 97-0069
BOCA RATON, FL 33497-0069**



04012008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1927626	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**PALOMBI, GARY
778 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

DATE
04/17/08-80024-008 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
MEREDITH, JOHN
626 NW 132ND TERRACE
PLANTATION, FL 33325**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
PRZYSTAS, RICHARD
531 NW 132ND TERRACE
PLANTATION, FL 33325**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
KORSGARD, MARIE
13296 N.W. 7TH STREET
PLANTATION, FL 33325**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BOAZ, JOHN
13296 NW 6TH COURT
PLANTATION, FL 33325**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
KIRBY, SUZANNE
702 NW 132ND TERRACE
PLANTATION, FL 33325**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

John D Meredith - President
LAGO WEST HOMEOWNERS ASSN

4-1-08

Date Daytime Phone #