

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 8:00 am
Secretary of State

04-12-2007 90019 050 ****70.00

DOCUMENT # 751483

1. Entity Name
LUCERNE LAKES NORTH SWIM CLUB, INC.



Principal Place of Business
4119 LUCERNE LAKES BLVD
LAKE WORTH, FL 33467 US

Mailing Address
4119 LUCERNE LAKES BLVD
LAKE WORTH, FL 33467 US

40037001



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02152007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2052124

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERON, JOAN
4125 PINE GREEN RUN
LAKE WORTH, FL 33467

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Joan Heron

JOAN HERON TREASURER

4/8/07

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME HARRIS, JEAN
STREET ADDRESS 4415 LUCERNE VILLAS LANE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE T ☐ Delete
NAME HERON, JOAN
STREET ADDRESS 4125 PINE GREEN RUN
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE D ☒ Delete
NAME WELEDNIGER, LOUISE
STREET ADDRESS 4360 LUCERNE VILLAS LANE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE VP ☐ Delete
NAME CRAVEN, JEANNE
STREET ADDRESS 4410 LUCERNE VILLA LANE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE D ☒ Delete
NAME NIEVES, ORLANDO
STREET ADDRESS 7052 PINE MANOR DR
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME DUNIVANT, GEORGE
STREET ADDRESS 7146 PINE BLUFF DRIVE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME MINTEER, RUSS
STREET ADDRESS 7147 PINE MANOR DRIVE
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE D ☐ Change ☒ Addition
NAME WEINSTOCK, BRENDA
STREET ADDRESS 4450 LUCERNE VILLAS LANE
CITY-ST-ZIP LAKE WORTH, FL 33467

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:

Joan Heron

JOAN HERON TREASURER

4/8/07 561-642607

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #