FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthg

Secretary of Ste DIVISION OF CORPORATIONS

1998 **DOCUMENT #**Corporation Name

751661

LONE PINE WEST MOBILE PARK HOME OWNERS ASSOCIATI ON, INC.

FILED Apr 29 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				I IBOTII IBODI OTIBI ISAKO DINIO BITOL ITOL ÖVETI OLOTI EVETI OLOTI OVETI OLOTI OVETI OLOTI OVETI OLOTI OLOTI	
SO2 LONE PINE LN 126 LONG PING TER 302 LONE PINE LN - 126 LONG PINE TE PEMBROKE PARK FL 33009 US					S. Date Incorporated or Qualified 03/21/1980 4. FEI Number Applied For
					59-2051062 Not Applicable
	face of Business	2a. Mailing Ad	dress		5. Certificate of Status Desired S8.75 Additional
21		26	<u> </u>		5. Certificate of Status Desired Fee Required
Sulte, Apt.	#. etc.	 	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be
22 City & Stat		City & Stat	City & State		Trust Fund Contribution
23		h	26		7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	0	country	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30.
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
				61 Name	Madeline Lambert
ROSS, MAURICE				82 Street	Address (P.O. Box Number is Not Acceptable)
				83	73 Jerrace
PEMBRU	KE PARK FL 33009				*
				84 City	Penibroke Park FL 85 Zig Code
11. Pursuant	to the provisions of Sections 617.	.0502 and 617.1508, Fic	orida Statutes, the	above-named	
Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 517.0503, Florida Statutes.					
SIGNATURE MADELEINE LAMBERT Madeleine Janber 3/11/98					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent eignature required when reinstating) when the control of the control o					
TITLE	OFFICERS	AND DIRECTORS	DELETE 1.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	•	بحو		1 TITLE 2 Name	P Change 29 Addition
STREET ADDRESS	BISSONNETTE, RENE 348 LONE PINE LANE			2 mame 3 street address	ROLLAND LAPIERRE
CITY-ST-ZIP	PEMBROKE PARK FL			4 CITY - ST - ZIP	224 Lane Pentoroke Pk F1 33 ⁰ 09
TITLE	V P			1 TITLE	T Change Addition
NAME	GENDRON, GILLES		2.5	2 NAME	LYSE DESJARDINS
STREET ADDRESS	138 LONE PINE TERRACE		2.3	3 STREET ADDRESS	126 Terrace
CITY-ST-ZIP	PEMBROKE PARK FL		2.	4 CITY-ST-ZIP	Penbroke Park F1 33009
TITLE	D	Ø	DELETE 9.1	1 TITLE	V Change & Addition
NAME	MILLER, MARY		3.2	2 NAME	JEANNINE DELAFONIAINE
STREET ADDRESS	130 TERACE			3 STREET ADDRESS	304 Lane Penbroke Park F1 33009
CITY-ST-ZWP	PEMBROKE PARK FL 3300			4. CITY-ST-ZIP	Peliticke Park FI 331/9
TITLE NAME	D ODAY OADOLBIC	ليا		1 TITLE	madeleine fambert Change Addition
STREET ADDRESS	GRAY, CAROLINE 113 DR.			2 NAME	133 LONE FINE IER
CITY-SI-ZIP	PEMBROKE PARK FL 3300	10		STREET ADDRESS City-St-Zip	HALLANDALE FL 33009
TITLE	S			TITLE	Ada Tusker Change MAddition
NAME	ROY, CLAIRE		• • • • • • • • • • • • • • • • • • • •	NAME	HALLANDALE FL 32009 Rda Fisher
STREET ADDRESS	350 LONE PINE LANE			STREET ADDRESS	
CITY-ST-ZIP	PEMBROKE PARK FL			CITY-ST-ZIP	HALLANDALE, FL 33009
TITLE	T	78		TITLE [YVON TREMBLAY Change Addition
NAME	ROSS, MAURICE		6.2	NAME	206 JONE PINE LANE
STREET ADDRESS	103 TERRACE		6.3	STREET ADDRESS	HALLANDALE, FL 33009
CITY-ST-ZIP	PEMBROKE PARK FL		6.4	CITY-ST-ZIP	The state of the s

Thereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trubbee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or preprint a statement with an address.

YSE Design Division Research

SIGNATURE:

954- 981-1082