

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764866

FILED  
Mar 13, 2009  
Secretary of State

**Entity Name:** LUCERNE LAKES GOLF COLONY CONDOMINIUM NO. 6 ASSOCIATION, INC.

**Current Principal Place of Business:**

7268 GOLF COLONY CT.  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

2950 JOG RD  
LAKE WORTH, FL 33467

**New Mailing Address:**

**FEI Number:** 59-2555245

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DICKER, EDWARD  
1818 AUSTRALIAN AVE SOUTH  
WEST PALM BEACH, FL 33409 US

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

DICKER, EDWARD  
1818 AUSTRALIAN AVE SOUTH  
SUITE 400  
WEST PALM BEACH, FL 33409 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: EDWARD DICKER

03/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: HASTINGS, EVELYN  
Address: 7281 GOLF COLONY CT #203  
City-St-Zip: LAKE WORTH, FL 33467

Title: ST ( ) Delete  
Name: FAGRAN, NANCY  
Address: 7209 GOLF COLONY CT., #101  
City-St-Zip: LAKE WORTH, FL 33467

Title: T (X) Delete  
Name: SCHAECK, ALFRED  
Address: 7281 GOLF COLONY CT., #201  
City-St-Zip: LAKE WORTH, FL 33467

Title: P ( ) Delete  
Name: HASTINGS, EDWARD  
Address: 7281 GOLF COLONY CT #203  
City-St-Zip: LAKE WORTH, FL 33467

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FARRAH, NANCY  
Address: 7269 GOLF COLONY COURT #101  
City-St-Zip: LAKE WORTH, FL 33467

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: EDWARD HASTINGS

P

03/13/2009

Electronic Signature of Signing Officer or Director

Date