

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90079 042 ****61.25

DOCUMENT # 764953

1. Entity Name

LAKE SIDE CONDOMINIUM ASSOCIATION NO. 4, INC.



Principal Place of Business

**10141 MANGROVE DR
BOYNTON BEACH FL 33437-1310**

Mailing Address

**10780 CEDAR POINT BLVD
BOYNTON BEACH FL 33437-1310**

50035142



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2293870

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CUSTOM PROPERTY MGMT
2328 S CONGRESS AVE, STE 2A
WEST PALM BCH FL 33406**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

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 VPD ☐ Delete
NAME BROWNSTEIN, HERBERT
STREET ADDRESS 10137 MANGROVE DR. #104
CITY-ST-ZIP BOYNTON BEACH FL

TITLE PD ☐ Delete
NAME POMERANTZ, SHIRLEY
STREET ADDRESS 10141 MANGROVE DR #205
CITY-ST-ZIP BOYNTON BCH FL

TITLE S ☒ Delete
NAME RESNICK, IRVING
STREET ADDRESS 10137 MANGROVE DRIVE 106
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE TD ☐ Delete
NAME ABRAMSKY, HERMAN
STREET ADDRESS 10141 MANGROVE DR #102
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE D ☒ Delete
NAME KRAMER, GLORIA
STREET ADDRESS 10141 MANGROVE DRIVE #103
CITY-ST-ZIP BOYNTON BEACH FL 33437

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 S ☐ Change ☒ Addition
NAME LASKY, JERRY
STREET ADDRESS 10137 MANGROVE DR. #103
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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

TITLE D ☐ Change ☒ Addition
NAME NELSON, CHARLES
STREET ADDRESS 10137 MANGROVE DR. #105
CITY-ST-ZIP BOYNTON BEACH, FL 33437

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #