

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02339

FILED
Mar 23, 2009
Secretary of State

Entity Name: LAKE PALM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

117 N LAKESIDE DR
SUITE B
LAKE WORTH, FL 33460 US

New Principal Place of Business:

Current Mailing Address:

117 N LAKESIDE DR
SUITE B
LAKE WORTH, FL 33460 US

New Mailing Address:

FEI Number: 59-2617091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWNING, JOHN K
117 N LAKESIDE DR
SUITE B
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DOWNING, DAVID K
Address: 4820 LUDWELL BRANCH COURT
City-St-Zip: RALEIGH, NC 27612 US

Title: S () Delete
Name: TIILIKKA, PERTTI
Address: 117 N LAKESIDE DR UNIT A
City-St-Zip: LAKE WORTH, FL 33460 US

Title: D () Delete
Name: TIILIKKA, PEPE J
Address: 117 N LAKESIDE DR UNIT A
City-St-Zip: LAKE WORTH, FL 33460 US

Title: T () Delete
Name: DOWNING, DAVID
Address: 4820 LUDWELL BRANCH COURT
City-St-Zip: RALEIGH, NC 27612 US

Title: D () Delete
Name: DOWNING, JOHN
Address: 117 N LAKESIDE DR SUITE B
City-St-Zip: LAKE WORTH, FL 33460 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: DOWNING, JOHN
Address: 731 NORTH M ST
City-St-Zip: LAKE WORTH, FL 33460 US

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: JOHN DOWNING

D

03/23/2009

Electronic Signature of Signing Officer or Director

Date