

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002912

FILED  
Apr 17, 2008  
Secretary of State

**Entity Name:** LAKE WORTH PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3767 LAKE WORTH ROAD  
SUITE 120  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

3767 LAKE WORTH ROAD  
SUITE 120  
LAKE WORTH, FL 33461

**New Mailing Address:**

**FEI Number:** 77-0595581

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAVIDGE, MICHAEL W  
3767 LAKE WORTH ROAD  
SUITE 120  
LAKE WORTH, FL 33461 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: D ( ) Delete  
Name: SAVIDGE, MICHAEL W  
Address: 453 GLENBROOK DRIVE  
City-St-Zip: ATLANTIS, FL 33462

Title: D ( ) Delete  
Name: BURGER, ROBERT  
Address: 597 NORTH COUNTRY CLUB DR  
City-St-Zip: ATLANTIS, FL 33462

Title: D ( ) Delete  
Name: SAN PEDRO, NANCY  
Address: 3731 LAKE WORTH ROAD  
City-St-Zip: LAKE WORTH, FL 33461

**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:

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: MICHAEL W. SAVIDGE

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04/17/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date