

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000700

**FILED**  
**Mar 02, 2011**  
**Secretary of State**

**Entity Name:** LHI PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4512 NORTH FLAGLER DRIVE - SUITE 204  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

4512 NORTH FLAGLER DRIVE - SUITE 204  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:** 20-0648406

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIELDS, JOSEPH R JR.  
4512 NORTH FLAGLER DRIVE - SUITE 306  
WEST PALM BEACH, FL 33407 US

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

CLOUGH, RANDY M  
4512 NORTH FLAGLER DRIVE - SUITE 204  
WEST PALM BEACH, FL 33407 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: RANDY M CLOUGH

03/02/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LEDAKIS, JOHN  
Address: 4512 N FLAGLER DR #301  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SEC  
Name: FIELDS, JOSEPH  
Address: 4512 N FLAGLER DR #306  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TR  
Name: CLOUGH, RANDY  
Address: 4512 N FLAGLER DR #204  
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby 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 all other like empowered.

SIGNATURE: RANDY M CLOUGH

TR

03/02/2011

Electronic Signature of Signing Officer or Director

Date