

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008388

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** VIA LUGANO CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1400 VIA LUGAND CIRCLE  
BOYNTON BEACH, FL 33436

**New Principal Place of Business:**

**Current Mailing Address:**

1400 VIA LUGAND CIRCLE  
BOYNTON BEACH, FL 33436

**New Mailing Address:**

**FEI Number:** 20-5569096

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: CHRM  
Name: GOTTESDIENER, LAWRENCE R  
Address: 2150 WASHINGTON STREET  
City-St-Zip: NEWTON, MA 02462

Title: SD  
Name: ABAIR, SUZANNE  
Address: 2150 WASHINGTON STREET  
City-St-Zip: NEWTON, MA 02462

Title: PT  
Name: ROSENTHAL, STEVEN P  
Address: 2150 WASHINGTON STREET  
City-St-Zip: NEWTON, MA 02462

Title: CEO  
Name: ROSENTHAL, STEVEN P  
Address: 2150 WASHINGTON STREET  
City-St-Zip: NEWTON, MA 02462

Title: VPD  
Name: THOMPSON, WILLIAM M  
Address: 2150 WASHINGTON STREET  
City-St-Zip: NEWTON, MA 02462

Title: D  
Name: GARDNER, STEVEN  
Address: 100 VIA LUGANO CIRCLE, #105  
City-St-Zip: BOYNTON BEACH, FL 33436

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: SUZANNE ABAIR

SD

01/06/2011

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

\_\_\_\_\_  
Date