2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2007 8:00 am Secretary of State

	AIIIOAL				. 30	ecretai	ry or Su	ale	
DOCUMENT # N18875 1. Entity Name LUCERNE GREENS CONDOMINIUM ASSOCIATION, INC.							0864 045 ****6		
Principal Place of Business 2950 JOG RD GREENACRES, FL 33467		Mailing Address 2950 JOG RD GREENACRES, FL 33467			buu48080				
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04172007 C	hg-NP (CR2E037 (12/06)		
City & State		City & State			4. FEI Number Applied For 59-2787572 Not Applicable				
Zip	Country	Zip	Country		5. Certificate of S		□ \$8.75 Add Fee Required		
	6. Name and Address of Current F	legistered Agent			7. Name and Add	tress of New Reg	istered Agent		
DICKER, EDWARD ESQ. 1818 AUSTRALIAN AVE S STE 400 W PALM BCH, FL 33409				Name Street Address (P.O. Box Number is Not Acceptable)					
			City	,			FL Zip Code	}	
	named entity submits this statement for ions of registered agent.	the purpose of changing	its registered offic	ce or register	red agent, or both, in	the State of Florid	a. I am familiar with,	and accept	
SIGNATURE.	Signature, typed or printed name of registered agent a	nd title if applicable (N	OTE: Registered Agent :	signature required	t when reinstating)		DATE		
	Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make check payable to Florida Department of State			
10.	OFFIÇERS AND DIR	ECTORS	11.		ADDITIONS/CHANG	SES TO OFFICERS	AND DIRECTORS IN	10	
NAME SIREET ADDRESS CITY-ST-ZIP	PD GENTILE, WILLIAM P 4710 LUCERNE LAKES BLVD. #; LAKE WORTH, FL 33467	🔀 Delete	TITLE NAME STREET ADDR CHY-ST-ZIP	PD Kle	inert, E 93 Lucer Ke Worth	ric ne Lak	□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ILLUZZI, JOHN 4704 LUCERNE LAKES BLVD. #; LAKE WORTH, FL 33467	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	5D Mis 470		riet eLakes	Change Bivd. # 1	M Addition	
NAME STREET ADDRESS CITY-ST-ZIP	TD KIDD, TIMOTHY 4699 LÜCERNE LAKES BLVD. # LAKE WORTH, FL 33467	⊠ Delete	NAME STREET ADDR CITY-ST-ZIP	D Cla 469 Lak	ney Tin	nothy ne Lak	□ Change es Bivd.	₩Addition ₩	
TITLE NAME SIREET_ADDRESS CITY-ST-ZIP	D KIRSCHNER, SEYMOUR 4702 LUCERNE LAKES BLVD., # LAKE WORTH, FL 33467	™ Delete 203	TITLE NAME STREET ADDR CITY-ST-ZIP	DOT DOT 868 468		heresa ne Lake.	□ Change - 5 Biod. #	∰Addition 203	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTHEWS, DOROTHY 4711 LUCERNE LAKES BLVD. # LAKE WORTH, FL 33467	Delete ☐	FITLE NAME STREET ADDR CITY-ST-ZIP	RESS			☐ Change	Addition	
MAME		☐ Delete	TITLE NAME	necc.			☐ Change	☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 ay address, with all other like empowered.

CIFY-SI-ZIP

CITY-ST-ZIP

SIGNATURE: OH 17 107 L41-101L9

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Design Propos 4