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Jan 31 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N26062 (2)

1. Corporation Name

LUCERNE PARK CONDOMINIUM ASSOCIATION NO. THIRTEE
N, INC.

Principal Place of Business

Mailing Address

3409 JOG PARK DR.
GREENACRES FL 33467-2038
US3409 JOG PARK DR.
GREENACRES FL 33467-2038
US3. Date Incorporated or Qualified
04/22/19883a. Date of Last Report
02/20/1996

4. FEI Number

65-0179876

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GINSPARG, JOSHUA
3403 JOG PARK DR.
GREENACRES FL 33467

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME GINSPARG, JOSUA
STREET ADDRESS 3403 JOG PARK DR
CITY-ST-ZIP GREENACRES FL ☐ DELETETITLE TD
NAME SCHNEIDER, KATHERINE
STREET ADDRESS 3409 JOG PARK DR.
CITY-ST-ZIP GREENACRES FL ☐ DELETETITLE SD
NAME ROGUT, SIDNEY
STREET ADDRESS 3370 JOG PARK DR
CITY-ST-ZIP GREENACRES FL ☐ DELETETITLE D
NAME PATSCH, WALTER H
STREET ADDRESS 3399 JOG PARK DR.
CITY-ST-ZIP GREENACRES FL ☐ DELETETITLE D
NAME MORIN, ALFRED E
STREET ADDRESS 3401 JOG PARK DRIVE
CITY-ST-ZIP GREENACRES FL ☒ DELETETITLE D
NAME WOODELL, CHRISTINE
STREET ADDRESS 3380 JOG PARK DRIVE
CITY-ST-ZIP GREEN ACRES FL ☐ DELETE1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIPTD
KETTLES, CLAIRE
3395 JOG PARK DRIVE
GREEN ACRES FL 33467

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

JOSHUA GINSPARG

1-13-97 561-966-2670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 6044086

CR2E037 (9/96)