

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29198

FILED
Apr 04, 2012
Secretary of State

Entity Name: LAWNWOOD PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2100 NEBRASKA AVE
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

430 NW LAKE WHITNEY PL
PORT SAINT LUCIE, FL 34986

New Mailing Address:

FEI Number: 59-1764486

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAYSHORE ASSOCIATION MANAGEMENT
430 NW LAKE WHITNEY PLACE
PORT ST LUCIE, FL FL 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: DP
Name: BERGHASH, LESLIE M.D.
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: DS
Name: SHAREEF, HUMAYUN M.D.
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: DT
Name: BALL, ADAM M.D.
Address: 430 NW LAKE WHITNEY PLACE
City-St-Zip: PORT ST LUCIE, FL 34986

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: LESLIE BERGHASH

DP

04/04/2012

Electronic Signature of Signing Officer or Director

Date