

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40027

FILED  
Jun 27, 2009  
Secretary of State

**Entity Name:** LUCERNE PARK CONDOMINIUM ASSOCIATION NO. FIFTEEN, INC.

**Current Principal Place of Business:**

%MRS BRENICE SANDLER  
3327 JOG PARK DR  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

% HAROLD E SELLS  
3331 JOG PARK DR  
GREENACRES, FL 33467

**Current Mailing Address:**

%MRS BRENICE SANDLER  
3327 JOG PARK DR  
LAKE WORTH, FL 33467

**New Mailing Address:**

% HAROLD E SELLS  
3331 JOG PARK DR  
GREENACRES, FL 33467

**FEI Number:** 65-0227802 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SELLS, HAROLD E  
3331 JBG PARK DR  
GREENACRES, FL 33467 US

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

SELLS, HAROLD E  
3331 JOG PARK DR  
GREENACRES, FL 33467 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: \_\_\_\_\_

06/27/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VTD ( ) Delete  
Name: LUSTBADER, MATRTHA  
Address: 3335 JOE PARK DR  
City-St-Zip: GREEN ACRES, FL 33467

Title: VSD ( ) Delete  
Name: RICHMAN, BARBARA  
Address: 3321 JOG PARK DR  
City-St-Zip: GREEN ACRES, FL 33467

Title: D ( ) Delete  
Name: WITHEROW, FRANK  
Address: 3323 JOG PARK DR.  
City-St-Zip: GREEN ACRES, FL 33467

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: KIRZNER, PHYLLIS  
Address: 3325 JOG PARK DR  
City-St-Zip: GREENACRES, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HAROLD E SELLS

PRES

06/27/2009

Electronic Signature of Signing Officer or Director

Date