FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	N93000004112	(9)

FOPA L	n Name LAKE WORTH LODGE #1	, INC.	, · · /	
Principal Place	e of Business	Mailing Address		
4793 HOLIDA WEST PALM US	Y WAY BEACH FL 33415-4623	4793 HOLIDAY WAY WEST PALM BEACH US		
				3. Date Incorporated or Qualified
 Principal Pl 	lace of Business	2a. Mailing Address 26		4. FEI Number Applied F. 59-2348740 Applied F. Not Applied F.
Suite, Apt.	#, etc.	Suite, Apt. #, etc	,	5. Certificate of Status Desired \$8.75 Addition
City & State	θ	Crty & State	· · · — — — — — — — — — — — — — — — — —	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution \$5.00 May B Added to Fees
Zip	Country	Zip	Country	This corporation has liability for intangible tax under s. 199.032
24	25	29	30	Florida Statutes
	9. Name and Address of Curi	rent Registered Agent		10. Name and Address of New Registered Agent
WEINDE	00 1000000		81 Nar	" WEINBERG, GEORGE M.
	RG, WERCOL M DLIDAY WAY		82 Stre	eet Address (P.O. Box Number is Not Acceptable)
	ALM BEHAC FL 33415 4-6	2 る	93	
WEST FA	ALM DEFIAC PL 33413 - TG	<i>u</i>	83	
			B4 City	85 Zip Code
11. Pursuant t	to the provisions of Sections 617.05	i02 and 617 1508 Florida St	atutes, the above-name	d corporation submits this statement for the purpose of changing its registered
or register	red agent, or both, in the State of Flate	orida. Such change was auth	orized by the corporatio	or corporation solutions this statement for the purpose of changing its registered agent. I also board of directors. I hereby accept the appointment as registered agent. I also board of directors.
	in, and accept the doligations of Se	ection 617.9503, Florida Stati	utes.	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable	(NOTE: Registered Agent signat	1-15-96 Date Date
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	Change Addi
NAME	BRANDT, IDA		1.2 NAME	•
STREET ADDRESS	10 16TH AVE N LAKE WORTH FL 3354	/ A	1.3 STREET ADDRE	ss
CITY-ST-ZIP TITLE	SD SD	.	1.4 CITY - ST - ZIP	
NAME	WEINBERG, GEROGE	DEFELE	2.1 TITLE	☐ Change ☐ Addi
STREET ADDRESS	4793 HOLIDAY WAY		2.2 NAME	
DITY-ST-ZIP	WEST PALM BEACH FL 3	3415	2.3 STREET ADDRE	SS
TITLE	VOTO	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	VÞ Mar Change ∏ Addi
NAMÉ	UHLEY, LANCE	J.	32 NAME	
STREET ADDRESS	15670 LINDBERG LANE		3.3 STREET ADDRES	SALVATORE RAIMONDI
CITY-ST-ZIP	WELLINGTON FL		3 4. CITY-ST-ZIP	W. PALM BCH FL 33407
TITLE	VD	DELETE	41 TITLE	☐ Change ☐ Addi
NAME	BLAIR, FRED		4. 2 NAME	
STREET ADDRESS	22624 SW 54TH AVE		4.3 STREET ADDRES	ss
CITY - ST - ZIP	BOCA RATON FL	##A. r. r	4.4 CITY - ST - ZIP	
TITLE	MASI, JOSEPH	DELETE	5.1 TITLE	Change Addi
NAME STREET ADDRESS	5657 S RUE RD		5.2 NAME	SS 147 HAMMOCKS DR
CITY - ST - ZIP	WEST PALM BEACH FL		5.3 STREET ADDRES	W. PALM BCH FL 334/3
TITLE	D	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addi
NAME	SOYT, SEYMOUR	- Street	6.2 NAME	
STREET ADDRESS	14245 CAMPANELLI DR		6.3 STREET ADDRES	ss
CITY-ST-ZIP	DELRAY BEACH FL		6.4 CITY - ST - ZIP	~
14. I do hereb	y certify that the information supplie	d with this filing is voluntarily	furnished and does not	qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further
oath; that	. LITE INFORMATION INCICATED ON THIS AR	inual report or supplemental : poration or the receiver or to	furnished and does not a annual report is true and istee empowered to exe	qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I furthe di accurate and that my signature shall have the same legal effect as if made un ocute this report as required by Chapter 617, Florida Statutes; and that my name

SIGNATURE:

GIGNATURE AND TYPED OR PRINTED NAMED S

G.M. WEINBERG

1-15-96

407-642-9474

Daytime Phone #