

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002800

FILED  
Feb 09, 2012  
Secretary of State

**Entity Name:** LAKE WORTH WEST RESIDENT PLANNING GROUP, INC.

**Current Principal Place of Business:**

4730 MAINE STREET  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

4730 MAINE STREET  
LAKE WORTH, FL 33461

**New Mailing Address:**

**FEI Number:** 65-0838753

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOFTEN, W. RAYMOND  
4730 MAINE STREET  
LAKE WORTH, FL 33461 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: T  
Name: ROSE, RAE  
Address: 4419 IXORA CIRCLE  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: D  
Name: RIVERA, DAMIAN  
Address: 4704 MAINE STREET  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: S  
Name: FRAZIER, DONNA JEAN  
Address: 509 URGUHART ST  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: VP  
Name: CHUTE, HEATH  
Address: P.O. BOX 6321  
City-St-Zip: LAKE WORTH, FL 33466 US

Title: P  
Name: LOFTEN, W. RAYMOND  
Address: P.O. BOX 5870  
City-St-Zip: LAKE WORTH, FL 33466 US

Title: ED  
Name: CLINTON, CAROL  
Address: 21346 GREEN HILL LANE  
City-St-Zip: BOCA RATON, FL 33428 US

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: CAROL CLINTON

ED

02/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date