

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709610

Entity Name: LAKE PARK GARDENS #1, INC. A CONDOMINIUM**Current Principal Place of Business:**

14475 STRATHMORE LANE

504

DELRAY BEACH, FL 33446

Current Mailing Address:

P. O. BOX 120356

FORT LAUDERDALE, FL 33312 US

FEI Number: 59-1147871**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**

CONDO RECEIVERSHIPS, LLC

14475 STRATHMORE LANE

#504

DELRAY BEACH, FL 33446 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:** NORMAN POPLOWITZ**04/22/2015**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CONDO RECEIVERSHIPS, LLC
Address 14475 STRATHMORE LANE
 504
City-State-Zip: DELRAY BEACH FL 33446

Title V
Name CONDO RECEIVERSHIPS, LLC
Address 14475 STRATHMORE LANE
 504
City-State-Zip: DELRAY BEACH FL 33446

Title T
Name CONDO RECEIVERSHIPS, LLC
Address 14475 STRATHMORE LANE
 504
City-State-Zip: DELRAY BEACH FL 33446

Title D
Name CONDO RECEIVERSHIPS, LLC
Address 14475 STRATHMORE LANE
 504
City-State-Zip: DELRAY BEACH FL 33446

Title D
Name CONDO RECEIVERSHIPS, LLC
Address 14475 STRATHMORE LANE
 504
City-State-Zip: DELRAY BEACH FL 33446

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: NORMAN POPLOWITZ**RECEIVER****04/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date