

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729389

Entity Name: LIME BAY CONDOMINIUM, INC. NO. 2**Current Principal Place of Business:**9190 LIME BAY BLVD
TAMARAC, FL 33321**Current Mailing Address:**9190 LIME BAY BLVD
TAMARAC, FL 33321 US**FEI Number:** 59-1606110**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHENDELL & ASSOCIATES, P.A.
635 SE 10 STREET, SUITE 635A
DEERFIELD BEACH, FL 33441 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRES
Name	WILLIAMS, CHARLOTTE E
Address	9190 LIME BAY BLVD
City-State-Zip:	TAMARAC FL 33321

Title	VP
Name	GARCIA, DARIO C
Address	9190 LIME BAY BLVD
City-State-Zip:	TAMARAC FL 33321

Title	TREASURER
Name	RICO, ALFONSO
Address	9190 LIME BAY BLVD
City-State-Zip:	TAMARAC FL 33321

Title	DIR
Name	FRANCO, CLEMENCIA
Address	9190 LIME BAY BLVD.
City-State-Zip:	TAMARAC FL 33321

Title	SECRETARY
Name	AUGUSTINE, JACQUELYN
Address	9190 LIME BAY BLVD
City-State-Zip:	TAMARAC FL 33321

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: CHARLOTTE WILLIAMS

PRESIDENT

02/03/2022

Electronic Signature of Signing Officer/Director Detail_____
Date