2017 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

DOCUMENT# 747813

Entity Name: LA QUINTA CONDOMINIUM ASSOCIATION, INC.

FILED Aug 09, 2017 Secretary of State CC8446549581

Current Principal Place of Business:

C/O DAVENPORT PROFESSIONAL PROPERTY MANAGEMENT, INC.

6620 LAKE WORTH ROAD SUITE F

LAKE WORTH, FL 33467

Current Mailing Address:

C/O DAVENPORT PROFESSIONAL PROPERTY MANAGEMENT, INC. 6620 LAKE WORTH ROAD SUITE F LAKE WORTH, FL 33467 US

FEI Number: 59-1970901 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GELFAND, MICHAEL ESQ. 1555 PALM BEACH LAKES BLVD **SUITE 1220** WEST PALM BEACH, FL 33401 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: MICHAEL GELFAND 08/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title DIRECTOR

Name HEBRON, PATRICIA Name GERHARDT, RICHARD

C/O DAVENPORT PROFESSIONAL C/O DAVENPORT PROFESSIONAL Address Address PROPERTY MANAGEMENT, INC. PROPERTY MANAGEMENT, INC.

6620 LAKE WORTH ROAD SUITE F 6620 LAKE WORTH ROAD SUITE F

LAKE WORTH FL 33467 LAKE WORTH FL 33467 City-State-Zip: City-State-Zip:

Title SECRETARY, TREASURER Title **PRESIDENT** Name Name

DELUCA, MARK GREENE, JOHN

> C/O DAVENPORT PROFESSIONAL Address C/O DAVENPORT PROFESSIONAL PROPERTY MANAGEMENT, INC. PROPERTY MANAGEMENT, INC.

> 6620 LAKE WORTH ROAD SUITE F 6620 LAKE WORTH ROAD SUITE F

City-State-Zip: LAKE WORTH FL 33467 City-State-Zip: LAKE WORTH FL 33467

Title **DIRECTOR**

Address

Name GOMEZ, FERNANDO

C/O DAVENPORT PROFESSIONAL Address

> PROPERTY MANAGEMENT, INC. 6620 LAKE WORTH ROAD SUITE F

LAKE WORTH FL 33467 City-State-Zip:

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.

08/09/2017 SIGNATURE: GREENE, JOHN **PRESIDENT**