

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751661

Entity Name: LONE PINE WEST MOBILE PARK HOME OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**103 LONE PINE TERRACE
HALLANDALE, FL 33009**Current Mailing Address:**352 LONE PINE LANE
HALLANDALE, FL 33009 US**FEI Number: 59-2051062****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**RENAUD, NATHALIE
103 LONE PINE TERRACE
HALLANDALE, FL 33009 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: NATHALIE RENAUD****02/04/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PAST-PRESIDENT, OTHER
Name CYR, FRANCOIS
Address 352 LONE PINE LANE
City-State-Zip: HALLANDALE FL 33009

Title TREASURER
Name BEAULNE, ROBERT V.P.
Address 150 LONE PINE DRIVE
City-State-Zip: HALLANDALE FL 33009

Title PRESIDENT
Name RENAUD, NATHALIE T.
Address 103 LONE PINE TERRACE
City-State-Zip: HALLANDALE FL 33009

Title S
Name QUESNEL, SUZETTE
Address 420 LONE PINE LANE
City-State-Zip: HALLANDALE FL 33009

Title VP
Name BLANCHETTE, ROGER
Address 349 LONE PINE LANE
City-State-Zip: HALLANDALE FL 33009

Title VP
Name BOUCHER, DENIS
Address 410 LONE PINE LANE
City-State-Zip: HALLANDALE FL 33009

Title DIRECTOR
Name DUROCHER, GILLES
Address 338 LONE PINE LANE
City-State-Zip: HALLANDALE FL 33009

Title DIRECTOR
Name LARIVIERE, PHILIPPE
Address 319 LONE PINE LANE
City-State-Zip: HALLANDALE FL 33009

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: FRANCOIS CYR**PAST-PRESIDENT****02/04/2016**

Electronic Signature of Signing Officer/Director Detail

Date