## 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 751661** 

Entity Name: LONE PINE WEST MOBILE PARK HOME OWNERS

ASSOCIATION, INC.

**Current Principal Place of Business:** 

420 LONE PINE LANE HALLANDALE, FL 33009

**Current Mailing Address:** 

**420 LONE PINE LANE** 

HALLANDALE, FL 33009 US

FEI Number: 59-2051062 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUESNEL, SUZETTE 420 LONE PINE LANE 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: SUZETTE QUESNEL 02/23/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

Title TREASURER Title PRESIDENT

NameVACANTNameQUESNEL, SUZETTEAddress420 LONE PINE LANEAddress420 LONE PINE LANECity-State-Zip:HALLANDALE FL 33009City-State-Zip: HALLANDALE FL 33009

Title SECRETARY Title VP

Name CHARETTE, DORIS Name VACANT

Address 132 LONE PINE DRIVE Address 420 LONE PINE LANE

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE FL 33009

Title VP Title DIRECTOR

Name GAUTHIER, SERGE Name GAGNÉ, DANIEL

Address 141 LONE PINE TERRACE Address 136 LONE PINE DRIVE

City-State-Zip: HALLANDALE BEACH FL 33009 City-State-Zip: HALLANDALE BEACH FL 33009

Title DIRECTOR

Name HOULE, MICHEL

Address 404 LONE PINE LANE

City-State-Zip: HALLANDALE BEACH 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: SUZETTE QUESNEL PRESIDENT 02/23/2023

Date

**FILED** 

Feb 23, 2023

Secretary of State 0761783239CC