SIGNATURE: GREEN, MICHAEL

Electronic Signature of Signing Officer/Director Detail

OAKLAND PARK, FL 33309

## **Current Mailing Address:**

C/O ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY MIRAMAR, FL 33025 US

## FEI Number: 59-2091973

## Name and Address of Current Registered Agent:

ULM, JEFFREY PRES ASSOCIATION SERVICES OF FLORIDA 10112 USA TODAY WAY MIRAMAR, FL 33025 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

## **Officer/Director Detail :**

Officer/Direc			
Title	DIR	Title	VP
Name	TOLEDANO, GEORGE DIR	Name	BROCK, DAVID
Address	10112 USA TODAY WAY	Address	10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025	City-State-Zip:	MIRAMAR FL 33025
Title	DIRECTOR	Title	DIRECTOR
Name	BROWN, DIANA	Name	COOPER, DYAN
Address	10112 USA TODAY WAY	Address	10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025	City-State-Zip:	MIRAMAR FL 33025
Title	DIR	Title	SECRETARY
Name	COOPER, KAREN DIR	Name	GUDZ, CHERYL
Address	10112 USA TODAY WAY	Address	10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025	City-State-Zip:	MIRAMAR FL 33025
Title	PRESIDENT	Title	TREASURER
Name	GREEN, MICHAEL	Name	SILVA, ROBERT
Address	10112 USA TODAY WAY	Address	10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025	City-State-Zip:	MIRMAR FL 33025
		•	-

## Continues on page 2

PRES

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.

# 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# 756153

Entity Name: LAKE POINTE OWNERS' ASSOCIATION, INC.

## **Current Principal Place of Business:**

209 LAKE POINTE DR.

Mar 27, 2013 Secretary of State CC6725333373

FILED

Certificate of Status Desired: No

Date

03/27/2013

#### **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	BOLTSFORD, CHRISTINE
Address	10112 USA TODAY WAY
City-State-Zip:	MIRAMAR FL 33025