

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000006787

Entity Name: HISTORICAL SOCIETY OF LAKE WORTH INC**Current Principal Place of Business:**15 N. M STREET
LAKE WORTH BEACH, FL 33460**Current Mailing Address:**15 N. M STREET
LAKE WORTH BEACH, FL 33460 US**FEI Number:** 81-3200453**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REED, JUDY
15 N. M STREET
LAKE WORTH, FL 33460 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 PRESIDENT
Name LOCKWOOD, STEVE
Address 511 LUCERNE AVE
 APT. #318
City-State-Zip: LAKE WORTH BEACH FL 33460

Title TR
Name REED, JUDY
Address 406 MONTEREY SQ
City-State-Zip: BOYNTON BEACH FL 33436

Title DIRECTOR
Name GUYAUX, SUSAN
Address 131 NO. GOLFVIEW RD
City-State-Zip: LAKE WORTH BEACH FL 33460

Title DIRECTOR
Name BROWNSTEIN, TED
Address 1016 SO. LAKESIDE DR
City-State-Zip: LAKE WORTH BEACH FL 33460

Title VP
Name CONE, MARION
Address 1502 CREST DR
City-State-Zip: LAKE WORTH BEACH FL 33461

Title DIRECTOR
Name BURLE, BENJAMIN MR.
Address P.O. BOX 1071
City-State-Zip: LAKE WORTH BEACH FL 33460

Title DIRECTOR
Name ROBINSON, HERMAN
Address 14 OCEAN BREEZE
City-State-Zip: LAKE WORTH BEACH FL 33460

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: JUDY D. REED**TREASURER****04/28/2023**

Electronic Signature of Signing Officer/Director Detail

Date