

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49950

Entity Name: LANCASTER LAKES AT ABERDEEN ASSOCIATION, INC.**Current Principal Place of Business:**C/O DAVENPORT PROPERTY MGMT
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467**Current Mailing Address:**C/O DAVENPORT PROPERTY MGMT
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467 US**FEI Number:** 65-0355389**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAYE BENDER REMBAUM, P.L.
1200 PARK CENTRAL BLVD., S.
POMPAÑO BEACH, FL 33064 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	VP
Name	BODERMAN, ELAINE
Address	C/O DAVENPORT PROPERTY MGMT 6620 LAKE WORTH RD. SUITE F
City-State-Zip:	LAKE WORTH FL 33467

Title	PRESIDENT
Name	DIX, LAWRENCE
Address	C/O DAVENPORT PROPERTY MGMT 6620 LAKE WORTH RD. SUITE F
City-State-Zip:	LAKE WORTH FL 33467

Title	SECRETARY
Name	AKAWIE, GARY
Address	C/O DAVENPORT PROPERTY MGMT 6620 LAKE WORTH RD. SUITE F
City-State-Zip:	LAKE WORTH FL 33467

Title	TREASURER
Name	KLINGER, HERB
Address	C/O DAVENPORT PROPERTY MGMT 6620 LAKE WORTH RD. SUITE F
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	HANOVER, ROY
Address	C/O DAVENPORT PROPERTY MGMT 6620 LAKE WORTH RD. SUITE F
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	SCHULTZ, SHELDON
Address	C/O DAVENPORT PROPERTY MGMT 6620 LAKE WORTH RD. SUITE F
City-State-Zip:	LAKE WORTH FL 33467

Title	DIRECTOR
Name	BRENNER, DENNIS
Address	C/O DAVENPORT PROPERTY MGMT 6620 LAKE WORTH RD. SUITE F
City-State-Zip:	LAKE WORTH FL 33467

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: LAWRENCE DIX

PRESIDENT

03/28/2019

Electronic Signature of Signing Officer/Director Detail_____
Date