

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002800

Entity Name: WEST LAKE VILLAGE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1200 LEMONWOOD STREET
HOLLYWOOD, FL 33019**Current Mailing Address:**1200 LEMONWOOD STREET
HOLLYWOOD , FL 33019 US**FEI Number:** 65-0444578**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PETERS & PETERS, ATTORNEYS AT LAW, P.A.
9900 STIRLING ROAD
232
COOPER CITY, FL 33024 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:** KEVIN PETERS

02/05/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name REPOLA, ANDREA
Address 1200 LEMONWOOD STREET
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR
Name MORSE, MICHAEL
Address 1200 LEMONWOOD STREET
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR
Name BOB, PALUMBO
Address 1200 LEMONWOOD ST
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR
Name BARBARA, NICOLAS
Address 1200 LEMONWOOD STREET
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR
Name SIMON, LESTER
Address 1200 LEMONWOOD STREET
City-State-Zip: HOLLYWOOD FL 33019

Title PRESIDENT
Name HOUGHTON, ANDREW
Address 1200 LEMONWOOD STREET
City-State-Zip: HOLLYWOOD FL 33019

Title DIRECTOR
Name RIMOIN, GERALD
Address 1200 LEMONWOOD STREET
City-State-Zip: HOLLYWOOD FL 33019

Title SECRETARY
Name RAMOS, ALBERT
Address 1200 LEMONWOOD STREET
City-State-Zip: HOLLYWOOD FL 33019

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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: ANDREW HOUGHTON

PRESIDENT

02/05/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	TREASURER
Name	MICKEY, JOSEPH
Address	1200 LEMONWOOD STREET
City-State-Zip:	HOLLYWOOD FL 33019