

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003882

Entity Name: LAWRENCE OAKS HOMEOWNERS' ASSOCIATION, INC.

FILED
Mar 11, 2016
Secretary of State
CC3860542080

Current Principal Place of Business:

C/O GRS MANAGEMENT ASSOCIATES INC
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH, FL 33463

Current Mailing Address:

C/O GRS MANAGEMENT ASSOCIATES INC
3900 WOODLAKE BLVD SUITE 309
LAKE WORTH, FL 33463 US

FEI Number: 65-0661577

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WARD DAMON AND POSNER PA
4420 BEACON CIRCLE
WEST PALM BEACH, FL 33407 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, DIRECTOR
Name SCHULMAN, RICHARD
Address 3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT, DIRECTOR
Name LANDOSKEY , DEBBIE
Address 3900 WOODLAKE BLVD SUITE 309
City-State-Zip: LAKE WORTH FL 33463

Title TREASURER, DIRECTOR
Name SUTHERLAND, KURT
Address C/O GRS MANAGEMENT ASSOCIATES
3900 WOODLAKE BLVD 309
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR
Name COTO, LEANDRO
Address 3900 WOODLAKE BLVD
309
City-State-Zip: LAKE WORTH FL 33463

Title SECRETARY, DIRECTOR
Name BELLANGER, LINDA
Address 3900 WOODLAKE BLVD
309
City-State-Zip: LAKE WORTH FL 33463

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: DEBBIE LANDOSKEY

PRESIDENT

03/11/2016

Electronic Signature of Signing Officer/Director Detail

Date