

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004512

Entity Name: LAKERIDGE GREENS HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**6824 SUN RIVER ROAD
BOYNTON BEACH, FL 33437**Current Mailing Address:**C/O FIRSTSERVICE RESIDENTIAL
6300 PARK OF COMMERCIAL BLVD
BOCA RATON, FL 33487 US**FEI Number:** 65-0607695**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SACHS & SAX CAPLAN
6111 BROKEN SOUND PARKWAY NW
BOCA RATON, FL 33487 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	S
Name	NATHAN, RALPH
Address	12252 EAGLE LANDING WAY
City-State-Zip:	BOYNTON BEACH FL 33437

Title	D
Name	STUART, DOREEN
Address	6922 GREENLEBE RD
City-State-Zip:	BOYNTON BEACH FL 33437

Title	VP
Name	FARBER, LARRY
Address	6529 SUN RIVER RD
City-State-Zip:	BOYNTON BEACH FL 33437

Title	TREASURER
Name	BRENNER, MERWYN
Address	6757 SUN RIVER ROAD
City-State-Zip:	BOYNTON BEACH FL 33437

Title	PRES
Name	PRAVDA, LENNY
Address	12260 PRAIRIE DUNES RD
City-State-Zip:	BOYNTON BEACH FL 33437

Title	DIRECTOR
Name	ROTTENBERG, ALAN
Address	6916 GRENELEFE ROAD
City-State-Zip:	BOYNTON BEACH FL 33437

Title	DIRECTOR
Name	BRENNER, MERWYN
Address	6757 GRENELEFE ROAD
City-State-Zip:	BOYNTON BEACH FL 33437

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: LENNY PRAVDA**PRESIDENT****01/22/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date