

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002800

Entity Name: LAKE WORTH WEST RESIDENT PLANNING GROUP, INC.**Current Principal Place of Business:**4730 MAINE STREET
LAKE WORTH, FL 33461**Current Mailing Address:**4730 MAINE STREET
LAKE WORTH, FL 33461**FEI Number:** 65-0838753**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CLINTON, CAROL
4730 MAINE STREET
LAKE WORTH, FL 33461 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:** CAROL CLINTON

02/07/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name ROSE, RAE
Address 4419 IXORA CIRCLE
City-State-Zip: LAKE WORTH FL 33461

Title PRESIDENT
Name CHUTE, HEATH
Address P. O. BOX 6321
City-State-Zip: LAKE WORTH FL 33466

Title EXECUTIVE DIRECTOR
Name CLINTON, CAROL
Address 21346 GREEN HILL LANE
City-State-Zip: BOCA RATON FL 33428

Title SECRETARY
Name CESAR, GESNER DR.
Address 4411 MAINE STREET
City-State-Zip: LAKE WORTH FL 33461

Title VP
Name ROMAN, SAM
Address 4201 WESTGATE AVENUE, SUITE A7
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR
Name STEWART, HOLLY
Address 3625 PATIO COURT
City-State-Zip: LAKE WORTH FL 33461

Title DIRECTOR
Name LLERENA, RICHARD
Address 2395 S. CONGRESS AVENUE
City-State-Zip: WEST PALM BEACH FL 33406

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: CAROL CLINTON

EXECUTIVE DIRECTOR

02/07/2017

Electronic Signature of Signing Officer/Director Detail

Date