

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 231450

Entity Name: LOST TREE VILLAGE CORPORATION**Current Principal Place of Business:**11300 US HIGHWAY 1
SUITE 100
PALM BEACH GARDENS, FL 33408**Current Mailing Address:**11300 US HIGHWAY 1
SUITE 100
PALM BEACH GARDENS, FL 33408 US**FEI Number:** 59-0947833**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STONE, HELEN E
11300 US HIGHWAY 1
SUITE 100
PALM BEACH GARDENS, FL 33408 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	DIRECTOR, VP
Name	SHAFFER-BIGGS, MARGARET
Address	11300 US HIGHWAY ONE - STE. 100
City-State-Zip:	PALM BEACH GARDENS FL 33408

Title	DIRECTOR, SECRETARY
Name	CROSBY, SHEILA B
Address	11300 US HIGHWAY 1 SUITE 100
City-State-Zip:	PALM BEACH GARDENS FL 33408

Title	CD
Name	STONE, HELEN E
Address	11300 US HIGHWAY ONE - STE. 100
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	VP, ASST. SECRETARY
Name	WHITE, NICHOLAS
Address	11300 US HIGHWAY 1 SUITE 100
City-State-Zip:	PALM BEACH GARDENS FL 33408

Title	P
Name	BAYER, CHARLES M JR
Address	11300 US HIGHWAY ONE - STE. 100
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	VP, TREASURER
Name	GERMANO, NATALIE
Address	11300 US HIGHWAY 1 SUITE 100
City-State-Zip:	PALM BEACH GARDENS FL 33408

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NICHOLAS WHITE

VICE PRESIDENT

01/21/2025

Electronic Signature of Signing Officer/Director Detail

Date