## Resolution of the Board

Regarding Resales

October 2002

Book 14252 & 978 filed 10/10/2002 Addross

10/10/2002 10:29:13 20020533645 OR BK 14252 PG 0978 Palm Beach County, Florida

Mail to Stevant Norman 7210 Pineforest Circle Cast Lake Worth, FI 3467

## NOTICE OF RECORDING RESOLUTION OF THE BOARD OF DIRECTORS OF LUCERNE EAKES HOMEOWNERS ASSOCIATION, INC.

The undersigned of Lucerne Lakes Homeowners Association, Inc. hereby certifies that the Resolution of the Board of Directors attached hereto and Exhibit "A " was duly adopted by the Board of Directors. The Resolution affects real property which is subject to the Second Amended and Restated Declaration of Covenants, Conditions and Restrictions of Lucerne Lakes as recorded in Book 12354, Page 1745 of the Public Records of Palm

State of Florida

Rrint Name

Rrint Name

Resolution

OFFICIAL NOTARYSEAL
DIANA L HOGE
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. DD144050
MY COMMISSION EXP. AUG. 30,2496

## RESOLUTION OF THE BOARD OF DIRECTORS OF LUCERNE LAKES HOMEOWNERS ASSOCIATION, INC. REGARDING RESALES

WHEREAS, Article VIII, Section 5 of the Second Amended and Restated Declaration of Covenants; Conditions and Restrictions of Lucerne Lakes, as recorded in Book 12354, Page 1745 of the Public Records of Palm Beach County, Florida, states that no Unit shall be occupied unless one permanent eccupant is fifty-five years of age or older;

WHEREAS, the Association requires new purchasers to complete a survey showing that at least one occupant of the Unit will be fifty-five years of age or older;

WHEREAS, the Board of Directors wants to ensure that new residents meet the age requirement;

WHEREAS, Article III of the Articles of Incorporation of Lucerne Lakes Homeowners
Association, Inc. authorizes the Board of Directors to adopt rules;

NOW THEREFORE, the Board of Directors resolves as follows:

1. All purchasers of a Unit are required to complete a Survey form, a copy of which is attached hereto as Exhibit "A".

2. All purchasers are required to obtain written approval of the transfer before closing on the purchase of the Unit.

Print Name: STANKATHORMAN

Title: (Res losen)

Date: 10-02

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This survey must be completed as we must comply with the requirements of the Housing for Older Persons Act of 1995. Failure to complete this form will be reported to the proper authorities and we will take any steps necessary to protect the interests of Lucerne Lakes H.O. Assoc., Inc. Please complete this survey and return to:

## LUCERNE LAKES HOMEOWNERS ASSOC., INC. 4400 LUCERNE LAKES BLVD. LAKE WORTH, FL. 33467

INFORMATION SURVEY	Y FOR LUCERNE LAKES SOUTH
Buyer:	
Address of Property:	
* 0	
Will there be any residents under 55 years of age	ge? YesNo
Please list the names of all parties who will perm	nanently reside in our community and there dates of Birth.
There must be one resident 55 Years or	older.
Please attach a copy of your Ip	
Number of Vehicles	
Types of Vehicles	
Any pets? Yes NO Number	
ALL PETS MUST BE UNDER 40 LBS. SEE A	ARTICLE VIII SECTION 6.
Have seen recoived a convent the Covener	nts and By Laws of Lucerne Lakes Homeowners Assoc.
Yes No	
Note: If you have not received a copy please	e obtain a copy before taking title to this property.
I HAVE RECEIVED A COPY OF THE	E LUCERNE LAKES HOMEOWNERS
ASSOCIATION'S COVENANTS AND	BY-LAWS AND FULLY AGREE TO ABIDE BY
THE RULES AND REGULATIONS IT	THEREIN ANY VIOLATION THAT MAY OCCUR ECTORS TO INSTITUTE ANY ACTION THAT
THEV MAY DEEM NECESSARY IN	DER THE COVENANTS TO PROTECT THE
INTERESTS OF THE COMMUNITY.	
	$(\bigcirc)$
	OWNER
	OWNER
DATE:	
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