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.

PRESIDENT

### SIGNATURE: ADAM VETTER

# 403 City-State-Zip: NAPLES FL 34103

Electronic Signature of Signing Officer/Director Detail

		0 0	
SIGNATURE	E: ROB SAMOUCE		
	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	VP	Title	PRESIDENT
Name	ROTHROCK, KIRK	Name	VETTER, ADAM JR
Address	605 MEADOWS EDGE LANE	Address	1695 PALOMAR DRIVE
City-State-Zip:	VILLANOVA PA 19085	City-State-Zip:	MANSFIELD PA 19085
Title	DIRECTOR	Title	SECRETARY
Name	MARSH, WILLIAM	Name	BOURCHEIX, PIERRE
Address	3100 GULFSHORE BLVD N., #302	Address	3100 GULFSHORE BLVD #503
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103
Title	TREASURER		
Name	KATZ, ALBERT		
Address	3100 GULF SHORE BLVD N.		

# Name and Address of Current Registered Agent:

C/O RESORT MANAGEMENT NAPLES. FL 34104 US

# FEI Number: 59-2516607

SAMOUCE & GAL PA. 5405 PARK CENTRAL CT NAPLES, FL 34109 US

**Current Mailing Address:** 

2685 HORSESHOE DR. S. SUITE # 215

# 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N00274

Entity Name: LUCERNE CONDOMINIUM ASSOCIATION, INC.

# **Current Principal Place of Business:**

3100 GULF SHORE BLVD NORTH NAPLES. FL 34103

# Secretary of State CC9795122067

04/03/2014 Date

FILED Apr 03, 2014

Certificate of Status Desired: No

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.

04/03/2014 Date