

2016 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

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR. S. SUITE # 215
NAPLES, FL 34104 US

FEI Number: 59-2516607

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAMOUCÉ, ROB
5405 PARK CENTRAL COURT
NAPLES, FL 34109 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: ROB SAMOUCÉ

04/05/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ROTHROCK, KIRK
Address 605 MEADOWS EDGE LANE
City-State-Zip: VILLANOVA PA 19085

Title SECRETARY
Name BOURCHEIX, PIERRE
Address 3100 GULFSHORE BLVD #503
City-State-Zip: NAPLES FL 34103

Title TREASURER
Name KATZ, ALBERT
Address 3100 GULF SHORE BLVD N.
403
City-State-Zip: NAPLES FL 34103

Title PRESIDENT
Name LEWIS, RICHARD
Address 653 N. KINGSBURY ST #2101
City-State-Zip: CHICAGO IL 60654

Title VP
Name VETTER, BUD
Address 1695 PALOMAR DRIVE
City-State-Zip: MANSFIELD OH 44906

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: RICHARD LEWIS

PRESIDENT

04/05/2016

Electronic Signature of Signing Officer/Director Detail

Date