

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00274

**FILED**  
**Mar 12, 2018**  
**Secretary of State**  
**CC0996705993**

**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

03/12/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name KATZ, ALBERT  
Address C/O RESORT MANAGEMENT  
2685 HORSESHOE DR. S. # 215  
City-State-Zip: NAPLES FL 34104

Title PRESIDENT  
Name LEWIS, RICHARD  
Address C/O RESORT MANAGEMENT  
2685 HORSESHOE DR. S. # 215  
City-State-Zip: NAPLES FL 34104

Title DIRECTOR  
Name VETTER, BUD  
Address C/O RESORT MANAGEMENT  
2685 HORSESHOE DR. S. # 215  
City-State-Zip: NAPLES FL 34104

Title TREASURER  
Name SZYMANSKI, RONALD  
Address C/O RESORT MANAGEMENT  
2685 HORSESHOE DR. S. # 215  
City-State-Zip: NAPLES FL 34104

Title VP  
Name VAUGHN, DAWN  
Address C/O RESORT MANAGEMENT  
2685 HORSESHOE DR. S. # 215  
City-State-Zip: NAPLES FL 34104

*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

03/12/2018

Electronic Signature of Signing Officer/Director Detail

Date