

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000000282

**Entity Name:** LOST KEY GOLF & BEACH CLUB SITE 18 MASTER CONDOMONIUM ASSOCIATION, INC.

**FILED**  
**Jun 01, 2021**  
**Secretary of State**  
**3932257679CC**

**Current Principal Place of Business:**

614 LOST KEY DR  
PENSACOLA, FL 32507

**Current Mailing Address:**

614 LOST KEY DRIVE  
PENSACOLA, FL 32507 US

**FEI Number: 20-4110620**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

MOORHEAD REAL ESTATE LAW GROUP  
127 PALAFOX PLACE  
SUITE 200  
PENSACOLA, FL 32502 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: JAY FRAISER**

**06/01/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ENGELBRECHT, BONNIE  
Address        616 LOST KEY DR  
                  UNIT 704 A  
City-State-Zip: PENSACOLA FL 32507

Title            VP  
Name            SMITH, DEBBI  
Address        608 LOST KEY DRIVE  
                  UNIT 405 C  
City-State-Zip: PENSACOLA FL 32507

Title            SECRETARY  
Name            LINQUIST, DAVID  
Address        612 LOST KEY DRIVE  
                  UNIT 201 B  
City-State-Zip: PENSACOLA FL 32507

Title            TREASURER  
Name            BEYER, DESIREE  
Address        14508 PERDIDO KEY DRIVE  
                  UNIT B  
City-State-Zip: PENSACOLA FL 32507

Title            DIRECTOR  
Name            WEBER, WILLIAM  
Address        616 LOST KEY DRIVE  
                  UNIT 902 A  
City-State-Zip: PENSACOLA FL 32507

*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: BONNIE ENGELBRECHT**

**PRESIDENT**

**06/01/2021**

Electronic Signature of Signing Officer/Director Detail

Date