

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000004595

**Entity Name:** LUCAYA LAKE CLUB HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 03, 2023**  
**Secretary of State**  
**6316534403CC**

**Current Principal Place of Business:**

2654 CYPRESS RIDGE BLVD  
STE 101  
WESLEY CHAPEL, FL 33544

**Current Mailing Address:**

2654 CYPRESS RIDGE BLVD  
STE 101  
WESLEY CHAPEL, FL 33544 US

**FEI Number: 47-2096117**

**Certificate of Status Desired: No**

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

INFRAMARK  
2654 CYPRESS RIDGE BLVD  
101  
WESLEY CHAPEL, FL 33544 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: KATIE IVANICS**

**03/03/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PERRY, NATHAN  
Address        2654 CYPRESS RIDGE BLVD  
                  STE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title            VP  
Name            GAGLIARDI, GINA  
Address        2654 CYPRESS RIDGE BLVD  
                  STE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title            SECRETARY  
Name            ADAMS, DEBIE  
Address        2654 CYPRESS RIDGE BLVD  
                  STE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title            TREASURER  
Name            NOLAN, MICHAEL  
Address        2654 CYPRESS RIDGE BLVD  
                  STE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

Title            DIRECTOR  
Name            AGARD, BRYAN  
Address        2654 CYPRESS RIDGE BLVD  
                  STE 101  
City-State-Zip: WESLEY CHAPEL FL 33544

*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: NATHAN PERRY**

**PRESIDENT**

**03/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date