

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000002218

**Entity Name:** LAKES AT POLO TRACE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

13405 WHISTLER MOUNTAIN ROAD  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

13405 WHISTLER MOUNTAIN ROAD  
DELRAY BEACH, FL 33446 US

**FEI Number: 82-4634202**

**Certificate of Status Desired: Yes**

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

SACHS SAX CAPLAN  
6111 BROKEN SOUND PARKWAY NW  
SUITE 200  
BOCA RATON, FL 33487 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: STEVE RAPPAPORT**

**02/06/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEVINE, GARY  
Address        7795 WILDFLOWER SHORES DRIVE  
City-State-Zip: DELRAY BEACH FL 33446

Title            TREASURER  
Name            NATALE, TINA  
Address        13113 WHISTLER MOUNTAIN ROAD  
City-State-Zip: DELRAY BEACH FL 33446

Title            VP, SECRETARY  
Name            MANGANO, TINA  
Address        7753 WILDFLOWER SHORES DRIVE  
City-State-Zip: DELRAY BEACH FL 33446

Title            DIRECTOR  
Name            CORONA, JOHN  
Address        7833 WATERFORD ISLES LANE  
City-State-Zip: DELRAY BEACH FL 33446

Title            DIRECTOR  
Name            AMSTER, STANLEY  
Address        7754 WILDFLOWER SHORES DRIVE  
City-State-Zip: DELRAY BEACH FL 33446

*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: GARY LEVINE**

**PRESIDENT**

**02/06/2024**

Electronic Signature of Signing Officer/Director Detail

Date