

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005364

Entity Name: LIGHTHOUSE POINT VILLAS HOMEOWNER'S ASSOCIATION, INC.**FILED**
Apr 08, 2021
Secretary of State
4334063503CC**Current Principal Place of Business:**5428 POINTE VILLA DR
LIGHTHOUSE POINT, FL 33064-7061**Current Mailing Address:**5408 POINTE VILLA DR
LIGHTHOUSE POINT, FL 33064-7061 US**FEI Number: 65-0623326****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ANDERSON, WILLIAM
5408 POINTE VILLA DR
LIGHTHOUSE POINT, FL 33064-7061 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:** WILLIAM ANDERSON**04/08/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	D'AMICO, STEVE
Address	5428 POINTE VILLA DR
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	TREASURER
Name	ANDERSON, WILLIAM
Address	5408 POINTE VILLA DR
City-State-Zip:	LIGHTHOUSE POINT FL 33064-7061

Title	VP
Name	FAVITTA, NICK
Address	5414 POINTE VILLA DR
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	SECRETARY
Name	GENESINI, TOMAS
Address	5412 POINTE VILLA DR
City-State-Zip:	LIGHTHOUSE POINT FL 33064

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: WILLIAM ANDERSON**TREASURER****04/08/2021**

Electronic Signature of Signing Officer/Director Detail

Date