

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

DOCUMENT# N95000002874

**Entity Name:** GRAND BAY RESORT AND RESIDENCES MASTER ASSOCIATION, INC.

**FILED**  
**Jan 03, 2024**  
**Secretary of State**  
**6732381552CC**

**Current Principal Place of Business:**

455 GRAND BAY DRIVE  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

455 GRAND BAY DRIVE  
KEY BISCAYNE, FL 33149

**FEI Number: 65-0815798**

**Certificate of Status Desired: No**

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

RAGAN, MARNIE ESQ.  
141 NE 3RD AVE.  
5TH FLOOR  
MIAMI, FL 33132 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: MARNIE DALE RAGAN**

**01/03/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LAKE, GARY  
Address        455 GRAND BAY DRIVE  
City-State-Zip: KEY BISCAYNE FL 33149

Title            VP  
Name            ZAJAI, RAUL  
Address        455 GRAND BAY DRIVE  
City-State-Zip: KEY BISCAYNE FL 33149

Title            DIRECTOR  
Name            CONVERS, OSCAR  
Address        455 GRAND BAY DRIVE  
City-State-Zip: KEY BISCAYNE FL 33149

Title            DIRECTOR  
Name            ROBERT , DINERSTEIN  
Address        455 GRAND BAY DRIVE  
City-State-Zip: KEY BISCAYNE FL 33149

Title            SECRETARY  
Name            DEFORTUNA, MONICA  
Address        455 GRAND BAY DR  
City-State-Zip: KEY BISCAYNE FL 33149

*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: MONICA DEFORTUNA**

**SECRETARY**

**01/03/2024**

Electronic Signature of Signing Officer/Director Detail

Date