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: CARMEN MARTIN

Electronic Signature of Signing Officer/Director Detail

SECRETARY

01/02/2019

DOCUMENT# N9500002874

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

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

Name and Address of Current Registered Agent:

RAGAN, MARNIE ESQ. 14 NE 1ST AVENUE 2ND FLOOR MIAMI, FL 33132 US Certificate of Status Desired: No

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.

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SIGNATURE	: MARNIE DALE RAGAN			01/02/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	VP	
Name	LAKE, GARY	Name	HOULZET, WILLIAM	
Address	455 GRAND BAY DRIVE	Address	455 GRAND BAY DRIVE	
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	KEY BISCAYNE FL 33149	
Title	TREASURER	Title	DIRECTOR	
Name	FOYO, GEORGE	Name	ADOLFO, HENRIQUES	
Address	455 GRAND BAY DRIVE	Address	455 GRAND BAY DRIVE	
City-State-Zip:	KEY BISCAYNE FL 33149	City-State-Zip:	KEY BISCAYNE FL 33149	
Title	SECRETARY			
Name	MARTIN, CARMEN			
Address	455 GRAND BAY DR			
City-State-Zip:	KEY BISCAYNE FL 33149			

FILED Jan 02, 2019 Secretary of State CC0996795114