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: MICHAEL BOYER

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/07/2022 Date

Entity Name: LUSSO	VILLAS CONDOMINIUM	ASSOCIATION, INC.
Entity Name: 100000		

Current Principal Place of Business:

C/O RESORT MANAGEMENT 2685 HORSESHOE DR SOUTH #215 NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT 2685 HORSESHOE DR SOUTH #215 NAPLES, FL 34104 US

FEI Number: 26-2540429

Name and Address of Current Registered Agent:

RESORT MANAGEMENT C/O RESORT MANAGEMENT 2685 HORSESHOE DR SOUTH #215 NAPLES, FL 34104 US

City-State-Zip: NAPLES FL 34104

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	ROBERT ROSENOW	04/07/2022		
	Electronic Signature of Registered Agent		Date	
Officer/Director Detail :				
Title	PRESIDENT	Title	TREASURER	
Name	BOYER, MICHAEL	Name	JACKSON, HOWARD	
Address	C/O RESORT MANAGEMENT 2685 HORSESHOE DR SOUTH #215	Address	C/O RESORT MANAGEMENT 2685 HORSESHOE DR SOUTH #215	
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104	
Title	SECRETARY			
Name	TUROW, ADRIANE			
Address	C/O RESORT MANAGEMENT 2685 HORSESHOE DR SOUTH #215			

Certificate of Status Desired: No

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N0800002687

Apr 07, 2022 Secretary of State 7801032728CC

FILED