

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000000267

**FILED**  
**Jan 07, 2021**  
**Secretary of State**  
**6840941382CC**

**Entity Name:** LAKOYA AT LELY RESORT NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

3001 EXECUTIVE DRIVE, SUITE 260  
CLEARWATER, FL 33762

**Current Mailing Address:**

3001 EXECUTIVE DRIVE, SUITE 260  
CLEARWATER, FL 33762 US

**FEI Number:** 45-1541224

**Certificate of Status Desired:** No

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

ADAMCZYK LAW FIRM, PLLC  
9130 GALLERIA CT  
#201,  
NAPLES, FL 34109 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:** MARK

01/07/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PRIESTLEY, ROBERT  
Address        3001 EXECUTIVE DRIVE, SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            VP  
Name            SZAFIR, CHARLES  
Address        3001 EXECUTIVE DRIVE, SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            TREASURER  
Name            HILL, LEE  
Address        3001 EXECUTIVE DRIVE, SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            SECRETARY  
Name            ASSINI, RICHARD  
Address        3001 EXECUTIVE DRIVE #260  
City-State-Zip: CLEARWATER FL 33762

Title            DIRECTOR  
Name            WENNINGER, JAMES  
Address        3001 EXECUTIVE DRIVE, SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title            DIRECTOR  
Name            BORRIELLO, ROBIN  
Address        3001 EXECUTIVE DRIVE, SUITE 260  
City-State-Zip: CLEARWATER FL 33762

*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:** ROBERT PRIESTLEY

PRESIDENT

01/07/2021

Electronic Signature of Signing Officer/Director Detail

Date