

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005979

**Entity Name:** LUCERNE POINTE RECREATION ASSOCIATION, INC.

**Current Principal Place of Business:**

4580 LUCERNE LAKES BLVD. W.  
LAKE WORTH, FL 33467

**Current Mailing Address:**

GRS MANAGEMENT ASSOCIATES  
3900 WOODLAKE BLVD STE 309  
LAKE WORTH, FL 33463 US

**FEI Number:** 65-0255540

**Certificate of Status Desired:** No

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

GELFAND, MICHAEL JESQ  
GELFAND & ARPE, P.A. REGIONS FINANCIAL TWR  
1555 PALM BEACH LAKES BOULEVARD  
WEST PALM BEACH, FL 33401 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name MARLENE, KRAUSS  
Address 3900 WOODLAKE BLVD.  
#309  
City-State-Zip: LAKE WORTH FL 33463

Title PRESIDENT  
Name CONCA, RALPH  
Address 3900 WOODLAKE BLVD.  
# 309  
City-State-Zip: LAKE WORTH FL 33463

Title T  
Name SPINNER, YVETTE  
Address 3900 WOODLAKE BLVD.  
# 309  
City-State-Zip: LAKE WORTH FL 33463

Title DIRECTOR  
Name MENDELL, ROBERT  
Address 3900 WOODLAKE BLVD,  
309  
City-State-Zip: GREEN ACERS FL 33463

*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:** RALPH CONCA

**PRESIDENT**

**02/19/2019**

Electronic Signature of Signing Officer/Director Detail

Date