

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000108778

**Entity Name:** LUCAS POINT HOLDINGS, LLC

**Current Principal Place of Business:**

9000 GLENLAKES BOULEVARD  
BROOKSVILLE, FL 34613

**Current Mailing Address:**

30 FLORAL PARKWAY  
CONCORD, ON L4K 4-R1 CA

**FEI Number:** 26-3773219

**Certificate of Status Desired:** No

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

TK REGISTERED AGENT, INC.  
101 E. KENNEDY BOULEVARD  
SUITE 2700  
TAMPA FL 33602 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

**Authorized Person(s) Detail :**

Title D  
Name DEGASPERIS, JIM VPRES  
Address 30 FLORAL PARKWAY  
City-State-Zip: CONCORD ON L4K 4-R1

Title D  
Name DEGASPERIS, ROBERT HSEC  
Address 30 FLORAL PARKWAY  
City-State-Zip: CONCORD ON L4K 4-R1

Title D  
Name DEGASPERIS, ROMEO TREAS  
Address 30 FLORAL PARKWAY  
City-State-Zip: CONCORD ON L4K 4-R1

Title VP  
Name CRAIGHEAD, DAVID VP  
Address 9000 GLENLAKES BOULEVARD  
City-State-Zip: BROOKSVILLE FL 34613

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JIM V. DE GASPERIS

VP

01/10/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date