

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706671

Entity Name: LA TOUR RIVAGE APARTMENTS, INC.**Current Principal Place of Business:**5435 JAEGER ROAD #4
NAPLES, FL 34109**Current Mailing Address:**5435 JAEGER ROAD #4
NAPLES, FL 34109 US**FEI Number:** 59-1092993**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARLICK, THOMAS B
8889 PELICAN BAY BOULEVARD
SUITE 300
NAPLES, FL 34108 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	TREASURER
Name	HENRY, TAYLOR
Address	5435 JAEGER ROAD #4
City-State-Zip:	NAPLES FL 34109

Title	VP
Name	MEADE, LAWRENCE JR.
Address	5435 JAEGER ROAD #4
City-State-Zip:	NAPLES FL 34109

Title	VP
Name	ENLOW, WILLIAM
Address	5435 JAEGER ROAD #4
City-State-Zip:	NAPLES FL 34109

Title	PRESIDENT
Name	MCCRACKEN, JAMES
Address	5435 JAEGER ROAD #4
City-State-Zip:	NAPLES FL 34109

Title	SECRETARY
Name	SCHUMACHER, RICHARD
Address	5435 JAEGER ROAD #4
City-State-Zip:	NAPLES FL 34109

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: JAMES MCCracken

PRESIDENT

04/21/2021

Electronic Signature of Signing Officer/Director Detail_____
Date