

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712910

Entity Name: FIRST LIDO CONDOMINIUM, INC.**Current Principal Place of Business:**1900 BENJAMIN FRANKLIN DRIVE
SARASOTA, FL 34236**Current Mailing Address:**1900 BENJAMIN FRANKLIN DRIVE
SARASOTA, FL 34236**FEI Number:** 59-1263587**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HEATH, TOM
1900 BEN FRANKLIN DR
SARASOTA, FL 34236 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:** TOM HEATH

04/08/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name ROBERTS, MIKE
Address 1900 BEN FRANKLIN
City-State-Zip: SARASOTA FL 34236

Title SECRETARY
Name SINGER, JOSHUA
Address 1900 BEN FRANKLIN DR
City-State-Zip: SARASOTA FL 34236

Title TD
Name ARNOLD, SARA GALE
Address 1900 BEN FRANKLIN DRIVE
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name BENOIT, DARLA
Address 1900 BENJAMIN FRANKLIN DRIVE
City-State-Zip: SARASOTA FL 34236

Title PRESIDENT
Name PERRINE, WILLIAM R
Address 1900 BENJAMIN FRANKLIN DRIVE
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name CLAPP, INGRID
Address 1900 BENJAMIN FRANKLIN DRIVE
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name KLOPPENBURG, BERNHARD
Address 1900 BENJAMIN FRANKLIN DRIVE
City-State-Zip: SARASOTA FL 34236

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: SARA GALE ARNOLD

TREASURER

04/08/2015

Electronic Signature of Signing Officer/Director Detail

Date