### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 729218** 

Entity Name: FAIRWAY TOWERS CLUB, BUILDING "D," INC.

**FILED** May 01, 2021 **Secretary of State** 9842325889CC

# **Current Principal Place of Business:**

C/O AMERICAN PROPERTY MANAGEMENT SERVICES, LLC 8825 TAMIAMI TRAIL EAST NAPLES, FL 34113

## **Current Mailing Address:**

C/O AMERICAN PROPERTY MANAGEMENT SERVICES. LLC 8825 TAMIAMI TRAIL EAST NAPLES, FL 34113 US

FEI Number: 59-1440014 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

AMERICAN PROPERTY MANAGEMENT SERVICES, LLC C/O AMERICAN PROPERTY MANAGEMENT SERVICES, LLC 8825 TAMIAMI TRAIL EAST NAPLES, FL 34113 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: ORLANDO MISERANDINO ORTIZ

05/01/2021

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR

Name TRIPP, ROBERT Name FISHER, RICHARD

C/O AMERICAN PROPERTY C/O AMERICAN PROPERTY Address Address

MANAGEMENT SERVICES, LLC MANAGEMENT SERVICES, LLC

8825 TAMIAMI TRAIL EAST 8825 TAMIAMI TRAIL EAST

NAPLES FL 34113 NAPLES FL 34113 City-State-Zip: City-State-Zip:

**DIRECTOR** Title Title SECRETARY, TREASURER

O'BRIEN, THOMAS Name VERWYS, LINDA Name

Address C/O AMERICAN PROPERTY Address C/O AMERICAN PROPERTY

> MANAGEMENT SERVICES, LLC MANAGEMENT SERVICES, LLC

8825 TAMIAMI TRAIL EAST 8825 TAMIAMI TRAIL EAST

NAPLES FL 34113 NAPLES FL 34113 City-State-Zip: City-State-Zip:

Title VΡ

Name O'BRIEN, TIM

C/O AMERICAN PROPERTY Address

MANAGEMENT SERVICES, LLC

8825 TAMIAMI TRAIL EAST

City-State-Zip: NAPLES FL 34113

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 TRIPP **PRESIDENT** 05/01/2021