

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744986

Entity Name: BAREFOOT BEACH PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Apr 23, 2024
Secretary of State
0573004103CC**Current Principal Place of Business:**C/O SEACREST SOUTHWEST
1044 CASTELLO DRIVE STE 206
NAPLES, FL 34103**Current Mailing Address:**C/O SEACREST SOUTHWEST
1044 CASTELLO DR STE 206
NAPLES, FL 34013 US**FEI Number:** 59-2474386**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SEACREST SOUTHWEST
1044 CASTELLO DRIVE
STE 206
NAPLES, FL 34103 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:** BRYAN FOWLER

04/23/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LIEBERMAN, DAVID
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title TREASURER
Name FREDERICK, SCOTT
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title DIRECTOR
Name WELCH, ELLEN
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title DIRECTOR
Name RAFTIS, CHRIS
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title DIRECTOR
Name KAHN, HILTON
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title DIRECTOR
Name MURPHY, REED
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title VP
Name NADAR, ANNETTE
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title DIRECTOR
Name ROSSI, VINCENT
Address C/O SEACREST SOUTHWEST
 1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

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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: DAVID LIEBERMAN

PRESIDENT

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DEAL, ADAM
Address C/O SEACREST SOUTHWEST
1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title DIRECTOR
Name BELTON, TERRY
Address C/O SEACREST SOUTHWEST
1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name PEED, ROSALIE
Address C/O SEACREST SOUTHWEST
1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34013

Title DIRECTOR
Name DEMMER , DANIEL
Address C/O SEACREST SOUTHWEST
1044 CASTELLO DR STE 206
City-State-Zip: NAPLES FL 34103