

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 745672

**Entity Name:** PARK PLACE OF NAPLES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DR S., #215  
NAPLES, FL 34104

**Current Mailing Address:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DR S., #215  
NAPLES, FL 34104 US

**FEI Number:** 59-1977502

**Certificate of Status Desired:** No

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

RESORT MANAGEMENT  
C/O RESORT MANAGEMENT  
2685 HORSESHOE DR S., #215  
NAPLES, FL 34104 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:** ROBERT ROSENOW

04/06/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GARRETSON, HENRY  
Address        4126 BELAIR LANE, APT C5  
City-State-Zip: NAPLES FL 34103-3189  
  
Title            SECRETARY  
Name            SPEAR, SUSAN  
Address        5125 FAIR ELMS AVE  
City-State-Zip: WESTERN SPRINGS IL 60558

Title            VP  
Name            HANN, JOHN  
Address        4126 BELAIR LANE, APT B10  
City-State-Zip: NAPLES FL 34103-3174  
  
Title            TREASURER  
Name            GUZEK, TIMOTHY  
Address        112 OLD ALLOUEZ COURT  
City-State-Zip: GREEN BAY WI 54301-1971

*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:** HENRY GARRETSON

**PRESIDENT**

04/06/2017

Electronic Signature of Signing Officer/Director Detail

Date