

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

DOCUMENT# 745870

**Entity Name:** SPRING LAKE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 13, 2017**  
**Secretary of State**  
**CC4439524579**

**Current Principal Place of Business:**

14360 S. TAMIAMI TRAIL  
UNIT B  
FORT MYERS, FL 33912

**Current Mailing Address:**

14360 S. TAMIAMI TRAIL  
UNIT B  
FORT MYERS, FL 33912 US

**FEI Number: 59-2070868**

**Certificate of Status Desired: No**

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

SAPP, PAUL  
14360 S. TAMIAMI TRAIL  
UNIT B  
FORT MYERS, FL 33912 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: PAUL SAPP**

**04/13/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FUENTES, ALEX  
Address        14360 S. TAMIAMI TRAIL  
                  UNIT B  
City-State-Zip: FORT MYERS FL 33912

Title            SECRETARY  
Name            EVANS, THOMAS  
Address        14360 S. TAMIAMI TRAIL  
                  UNIT B  
City-State-Zip: FORT MYERS FL 33912

Title            VP  
Name            FUENTES, MELISSA  
Address        14360 S. TAMIAMI TRAIL  
                  UNIT B  
City-State-Zip: FORT MYERS FL 33912

Title            TREASURER  
Name            MARKEE, ROBERT  
Address        14360 S. TAMIAMI TRAIL  
                  UNIT B  
City-State-Zip: FORT MYERS FL 33912

*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: ALEX FUENTES**

**PRESIDENT**

**04/13/2017**

Electronic Signature of Signing Officer/Director Detail

Date