

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 749089

**FILED**  
**Mar 31, 2022**  
**Secretary of State**  
**8428713929CC**

**Entity Name:** CHATEAUMERE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

SOUTHWEST PROP MGMT  
1044 CASTELLO DR STE 206  
NAPLES, FL 34103

**Current Mailing Address:**

SOUTHWEST PROPERTY MANAGEMENT  
1044 CASTELLO DR STE 206  
NAPLES, FL 34103 US

**FEI Number:** 59-2047915

**Certificate of Status Desired:** No

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

SOUTHWEST PROPERTY MANAGEMENT  
1044 CASTELLO DR  
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:** SOUTHWEST PROPERTY MANAGEMENT

03/31/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name RUSSELL, GEORGE  
Address SOUTHWEST PROPERTY  
MANAGEMENT  
1044 CASTELLO DR STE 206  
City-State-Zip: NAPLES FL 34103

Title P  
Name SHELTON, JAMES  
Address SOUTHWEST PROPERTY  
MANAGEMENT  
1044 CASTELLO DR STE 206  
City-State-Zip: NAPLES FL 34103

Title S  
Name SHARFMAN, STEVE  
Address SOUTHWEST PROPERTY  
MANAGEMENT  
1044 CASTELLO DR STE 206  
City-State-Zip: NAPLES FL 34103

Title D  
Name WATERHOUSE, TRENT  
Address SOUTHWEST PROPERTY  
MANAGEMENT  
1044 CASTELLO DR STE 206  
City-State-Zip: NAPLES FL 34103

Title VP  
Name HEPBURN , PATTI  
Address SOUTHWEST PROPERTY  
MANAGEMENT  
1044 CASTELLO DR STE 206  
City-State-Zip: NAPLES FL 34103

Title DIRECTOR  
Name SEIFRIED, GEORGE  
Address SOUTHWEST PROPERTY  
MANAGEMENT  
1044 CASTELLO DR STE 206  
City-State-Zip: NAPLES FL 34103

Title DIRECTOR  
Name KAYTAZ, JOHN  
Address SOUTHWEST PROP MGMT  
1044 CASTELLO DR STE 206  
City-State-Zip: NAPLES FL 34103

*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:** JAMES SHELTON

**PRESIDENT**

03/31/2022

Electronic Signature of Signing Officer/Director Detail

Date