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

**FILED**
**Mar 09, 2017**
**Secretary of State**
**CC3884487551**

DOCUMENT# 749232

**Entity Name:** PUNTA GORDA ISLES, SECTION 22 HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ALLIANT PROPERTY MANAGEMENT, LLC
13831 VECTOR AVENUE
FORT MYERS, FL 33907

**Current Mailing Address:**

C/O ALLIANT PROPERTY MANAGEMENT, LLC
13831 VECTOR AVENUE
FORT MYERS, FL 33907 US

**FEI Number: 59-2131293**

**Certificate of Status Desired:** No

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

STROHM, JOHN
C/O ALLIANT PROPERTY MANAGEMENT, LLC
13831 VECTOR AVENUE
FORT MYERS, FL 33907 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: JOHN STROHM 03/09/2017

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | | | |
|---|---|---|---|
| Title | PD | Title | VP |
| Name | HOLCOMB, CRAIG | Name | BALTZER, WAYNE |
| Address | C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE | Address | C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE |
| City-State-Zip: | FORT MYERS FL 33907 | City-State-Zip: | FORT MYERS FL 33907 |
| Title | TSD | Title | D |
| Name | WELCH, JIM | Name | ACKERSON, JON |
| Address | C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE | Address | C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE |
| City-State-Zip: | FORT MYERS FL 33907 | City-State-Zip: | FORT MYERS FL 33907 |
| Title | D | Title | D |
| Name | FARNHAM, DOROTHY | Name | JORDAN, GREG |
| Address | C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE | Address | C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE |
| City-State-Zip: | FORT MYERS FL 33907 | City-State-Zip: | FORT MYERS FL 33907 |
| Title | D | | |
| Name | KELLY, TERRY | | |
| Address | C/O ALLIANT PROPERTY MANAGEMENT, LLC 13831 VECTOR AVENUE | | |
| City-State-Zip: | FORT MYERS FL 33907 | | |

*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: JIM WELCH SECRETARY 03/09/2017

Electronic Signature of Signing Officer/Director Detail Date