

**2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 749974

**Entity Name:** TRAWLER VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

12140 CARISSA COMMERCE COURT #200  
FORT MYERS, FL 33966

**Current Mailing Address:**

15751 SAN CARLOS BLVD. #8  
FORT MYERS, FL 33908 US

**FEI Number:** 59-1880460

**Certificate of Status Desired:** No

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

BECKER & POLIAKOFF  
12140 CARISSA COMMERCE COURT #200  
FORT MYERS, FL 33966 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:** JOSEPH E ADAMS, ESQ.

10/03/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HOWARD, RICHARD  
Address 4585 TRAWLER CT. #305  
City-State-Zip: FORT MYERS FL 33912

Title VP  
Name CARLSON, ROBERT  
Address 4586 TRAWLER CT. #106  
City-State-Zip: FORT MYERS FL 33912

Title S  
Name MALVEN, PAUL  
Address 4591 TRAWLER CT. #102  
City-State-Zip: FORT MYERS FL 33912

Title D  
Name PALUMBO, AL  
Address 4586 TRAWLER CT. #203  
City-State-Zip: FORT MYERS FL 33912

Title P  
Name KUPFERBERG, ROBERT  
Address 4586 TRAWLER CR. #205  
City-State-Zip: FORT MYERS FL 33912

Title T  
Name PARSONS, JAMES  
Address 4575 TRAWLER CT. #106  
City-State-Zip: FORT MYERS FL 33912

Title D  
Name DENNISON, TIMOTHY  
Address 4585 TRAWLER CT. #104  
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:** ROBERT KUPFERBERG

PRESIDENT

10/03/2014

Electronic Signature of Signing Officer/Director Detail

Date