

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751005

Entity Name: VANDERBILT SURF COLONY, A CONDOMINIUM, SECTION II, ASSOCIATION, INC.**FILED**
Apr 29, 2021
Secretary of State
9138475146CC**Current Principal Place of Business:**15 BLUEBILL AVE
ATTN: MANAGER'S OFFICE
NAPLES, FL 34108**Current Mailing Address:**15 BLUEBILL AVE
ATTN: MANAGER'S OFFICE
NAPLES, FL 34108**FEI Number: 59-2099444****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SAMOUCÉ, & GAL, P.A.
5405 PARK CENTRAL COURT
NAPLES, FL 34109 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: ROB SAMOUCÉ****04/29/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BEISSINGER, GLORIA
Address 15 BLUEBILL AVE
City-State-Zip: NAPLES FL 34108

Title D, TREASURER
Name BIANCO, JOSEPH PJR
Address 15 BLUEBILL AVE
City-State-Zip: NAPLES FL 34108

Title D, PRESIDENT
Name CANNON, GLENN
Address 15 BLUEBILL AVE
City-State-Zip: NAPLES FL 34108

Title DIRECTOR
Name TOMAL, JUDY
Address 15 BLUEBILL AVENUE
City-State-Zip: NAPLES FL 34108

Title D, SECRETARY
Name HARRIS, MARIANNE
Address 15 BLUEBILL AVENUE
City-State-Zip: NAPLES FL 34108

Title VP
Name NIGON, TERRY
Address 15 BLUEBILL AVENUE
City-State-Zip: NAPLES FL 34108

Title DIRECTOR
Name SURGES, TERESE
Address 15 BLUEBILL AVE
City-State-Zip: NAPLES FL 34108

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: GLENN CANNON**04/29/2021**

Electronic Signature of Signing Officer/Director Detail

Date