## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 751879** 

Entity Name: SUNSET OF FORT MYERS CONDOMINIUM ASSOCIATION, INC.

FILED
Jan 28, 2022
Secretary of State
4602211239CC

## **Current Principal Place of Business:**

C/O PREMIER CAM SERVICES, LLC 3436 MARINATOWN LANE SUITE 3 NORTH FORT MYERS, FL 33903

## **Current Mailing Address:**

C/O PREMIER CAM SERVICES, LLC PO BOX 152047 CAPE CORAL, FL 33915 US

FEI Number: 59-2139172 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PREMIER CAM SERVICES, LLC C/O PREMIER CAM SERVICES, LLC 3436 MARINATOWN LANE SUITE 3 NORTH FORT MYERS, FL 33903 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: KYLE HUBLER 01/28/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR Title PRESIDENT

Name SERENA, SCOTT Name GREENBLATT, ERIC

Address C/O PREMIER CAM SERVICES, LLC Address C/O PREMIER CAM SERVICES, LLC

PO BOX 152047 PO BOX 152047

City-State-Zip: CAPE CORAL FL 33915 City-State-Zip: CAPE CORAL FL 33915

Title DIRECTOR Title SECRETARY, TREASURER

Name PATULLO, MELINDA Name LUTZ, LINDA

Address C/O PREMIER CAM SERVICES, LLC Address C/O PREMIER CAM SERVICES, LLC

PO BOX 152047 PO BOX 152047

City-State-Zip: CAPE CORAL FL 33915 City-State-Zip: CAPE CORL FL 33915

Title VP

Name JACOBS, JIM

Address C/O PREMIER CAM SERVICES, LLC

PO BOX 152047

City-State-Zip: CAPE CORAL FL 33915

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: ERIC GREENBLATT PRESIDENT 01/28/2022