

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756923

Entity Name: EL GALEON SOUTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O VESTA PROPERTY SERVICES
125 SW 3RD PL STE 207
CAPE CORAL, FL 33991**Current Mailing Address:**C/O VESTA PROPERTY SERVICES
125 SW 3RD PL STE 207
CAPE CORAL, FL 33991 US**FEI Number:** 59-2194084**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VESTA PROPERTY SERVICES
C/O VESTA PROPERTY SERVICES
125 SW 3RD PL STE 207
CAPE CORAL, FL 33991 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:** BRANDY DAVENPORT

02/02/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	ASHBY, ROD
Address	C/O VESTA PROPERTY SERVICES 125 SW 3RD PL STE 207
City-State-Zip:	CAPE CORAL FL 33991

Title	SECRETARY
Name	BUFORD, TIMOTHY
Address	C/O VESTA PROPERTY SERVICES 125 SW 3RD PL STE 207
City-State-Zip:	CAPE CORAL FL 33991

Title	DIRECTOR
Name	ROMANO, FRANK
Address	C/O VESTA PROPERTY SERVICES 125 SW 3RD PL STE 207
City-State-Zip:	CAPE CORAL FL 33991

Title	PRESIDENT, TREASURER
Name	TIMOTHY , GREENE
Address	C/O VESTA PROPERTY SERVICES 125 SW 3RD PL STE 207
City-State-Zip:	CAPE CORAL FL 33991

Title	DIRECTOR
Name	TOM, MIELECKI
Address	C/O VESTA PROPERTY SERVICES 125 SW 3RD PL STE 207
City-State-Zip:	CAPE CORAL FL 33991

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: TIMOTHY GREENE

PRESIDENT

02/02/2021

Electronic Signature of Signing Officer/Director Detail

Date