

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766606

**Entity Name:** BERRIEDALE ASSOCIATION, INC.

**Current Principal Place of Business:**

LOCKMABEN DRIVE AT FIDDLESTICKS COUNTRY CL  
FT. MYERS BEACH, FL 33912

**Current Mailing Address:**

MINETTE L LA CROIX, CPA, PA  
12050 SUMMERGATE CIR C-102  
FORT MYERS, FL 33913 US

**FEI Number:** 65-0107606

**Certificate of Status Desired:** No

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

LA CROIX, MINETTE L  
MINETTE L LA CROIX, CPA, PA  
12050 SUMMERGATE CIR C-102  
FORT MYERS, FL 33913 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:** MINETTE L. LA CROIX

04/27/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ZIEGENFUSS, ROBERT  
Address        C/O 12050 SUMMERGATE CIR  
                  C-102  
City-State-Zip: FORT MYERS FL 33913

Title            TREASURER  
Name            MCCANN, BARRY  
Address        C/O 12050 SUMMERGATE CIR  
                  C-102  
City-State-Zip: FT MYERS FL 33913

Title            SECRETARY  
Name            CHRISTIAN, DON  
Address        C/O 12050 SUMMERGATE CIR  
                  C-102  
City-State-Zip: FORT MYERS FL 33913

Title            VP  
Name            HEARD, MICHAEL  
Address        C/O 12050 SUMMERGATE CIR  
                  C-102  
City-State-Zip: FT MYERS FL 33913

Title            DIRECTOR  
Name            WALSH, DEBBY  
Address        C/O 12050 SUMMERGATE CIR  
                  C-102  
City-State-Zip: FORT MYERS FL 33913

Title            DIRECTOR  
Name            SPEAS, JACKIE  
Address        C/O 12050 SUMMERGATE CIR  
                  C-102  
City-State-Zip: FORT MYERS FL 33913

*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:** MICHAEL HEARD

VP

04/27/2022

Electronic Signature of Signing Officer/Director Detail

Date