

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

DOCUMENT# 767108

**Entity Name:** AMERICA OUTDOORS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

16900 S. TAMIAMI TRAIL  
FT. MYERS, FL 33908

**Current Mailing Address:**

16900 S. TAMIAMI TRAIL  
FT. MYERS, FL 33908

**FEI Number:** 59-2375877

**Certificate of Status Desired:** No

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

MATTHYS, JAMES  
16900 S. TAMIAMI TRAIL  
FORT MYERS, FL 33908 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:** JAMES MATTHYS

04/16/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MATTHYS, JAMES  
Address        16900 S. TAMIAMI TRAILB52  
City-State-Zip: FORT MYERS FL 33908

Title            SEC.  
Name            MAYES, EARL  
Address        16900 S. TAMIAMI TRAIL  
City-State-Zip: FT. MYERS FL 33908

Title            TREA  
Name            MUNEZ, JOE  
Address        16900 SO TAMIAMI TR R-04  
City-State-Zip: FT. MYERS FL 33908

Title            VP  
Name            MOORE, MAX  
Address        16900 S. TAMIAM TRAIL B29  
City-State-Zip: FORT MYERS FL 33908

Title            D  
Name            PARROTT, JEAN  
Address        16900 S. TAMIAMI TRAIL W-99  
City-State-Zip: FORT MYERS FL 33908

Title            D  
Name            ROHRBACH, RICKI  
Address        16900 SO TAMIAMI TRAIL W65  
City-State-Zip: FORT MYERS FL 33908

Title            DIRECTOR  
Name            BENNER, JAMES  
Address        16900 S.TAMIAMI TRL  
                  W-84  
City-State-Zip: FORT MYERS FL 33908

*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:** ANGIE CROKER

MANAGER

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date