2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770642

Entity Name: WIGGINS BAY FOUNDATION, INC.

FILED
Jun 29, 2020
Secretary of State
0368801746CC

Current Principal Place of Business:

% PARAMONT PROPERTY MANAGEMENT 5629 STRAND BLVD. SUITE #412 NAPLES, FL 34110

Current Mailing Address:

% PARAMONT PROPERTY MANAGEMENT 5629 STRAND BLVD. SUITE #412 NAPLES, FL 34110 US

FEI Number: 59-2736020 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOWNE PROPERTIES % PARAMONT PROPERTY MANAGEMENT 5629 STRAND BLVD. SUITE #412 NAPLES, FL 34110 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: MICHAEL TOWNS 06/29/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name MAGNANI, ED Name BIAS, HERB

Address % PARAMONT PROPERTY Address % PARAMONT PROPERTY

MANAGEMENT MANAGEMENT

5629 STRAND BLVD. SUITE #412 5629 STRAND BLVD. SUITE #412

City-State-Zip: NAPLES FL 34110 City-State-Zip: NAPLES FL 34110

Title TREASURER Title SECRETARY

Name RUSSO, DEBBIE Name CHARLIE, HENSEL

Address % PARAMONT PROPERTY Address % PARAMONT PROPERTY

MANAGEMENT MANAGEMENT

5629 STRAND BLVD. SUITE #412 5629 STRAND BLVD. SUITE #412

City-State-Zip: NAPLES FL 34110 City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name MCGILL, SUE

Address % PARAMONT PROPERTY

MANAGEMENT

5629 STRAND BLVD. SUITE #412

City-State-Zip: NAPLES FL 34110

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: ED MAGNANI PRESIDENT 06/29/2020