

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000464

Entity Name: ADDISON RESERVE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1514 GLEN EAGLE BLVD
NAPLES, FL 34104**Current Mailing Address:**5603 NAPLES BLVD.
NAPLES, FL 34109 US**FEI Number: 59-3671923****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MOORE PROPERTY MANAGEMENT, LLC
5603 NAPLES BLVD.
NAPLES, FL 34109 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:** GRAHAM NORCOMBE

03/28/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name CARD, NANCY
Address 15638 KESSELWOOD TRAIL
City-State-Zip: MARSHALL MI 49068

Title VP
Name LIND, ROY
Address C/OMOORE PROPERTY
MANAGEMENT
5603 NAPLES BLVD.
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name GENUOUSE, CAROLYN
Address C/O MOORE PROPERTY
MANAGEMENT
5603 NAPLES BLVD.
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name LOYD, MORRIS
Address C/O MOORE PROPERTY
MANAGEMENT
5603 NAPLES BLVD.
City-State-Zip: NAPLES FL 34109

Title PRESIDENT
Name COTE, WILLIAM
Address MOORE PROPERTY MANAGEMENT
LLC
5603 NAPLES BLVD.
City-State-Zip: NAPLES FL 34109

Title SECRETARY
Name BAHSTA, MARGARET
Address C/O MOORE PROPERTY
MANAGEMENT, LLC
5603 NAPLES BLVD.
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name DICENZO, JOSEPH
Address 255 GLEN EAGLE CIRCLE
City-State-Zip: NAPLES FL 34104

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: WILLIAM COTE

PRESIDENT

03/28/2018

Electronic Signature of Signing Officer/Director Detail

Date