2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000002147

Entity Name: VILLORESI AT MEDITERRA NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

%GULF BREEZE MGMT. SVCS., INC. 8910 TERRENE CT. STE. 200 BONITA SPRINGS, FL 34135

Current Mailing Address:

%GULF BREEZE MGMT. SVCS., INC. 8910 TERRENE CT. STE. 200 BONITA SPRINGS, FL 34135 US

FEI Number: 59-3697168

Name and Address of Current Registered Agent:

WEIDNER, RALPH L %GULF BREEZE MGMT. SVCS., INC. 8910 TERRENE CT. STE. 200 BONITA SPRINGS, FL 34135 US Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PD	Title	VD
Name	CORSONES, DEAN	Name	TUREN, RICHARD
Address	8910 TERRENE COURT, SUITE 200	Address	8910 TERRENE COURT, SUITED 200
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	BONITA SPRINGS FL 34135
Title	DIRECTOR	Title	D
Name	CRAWFORD, PETE	Name	ENGLAND, HERB
Address	8910 TERRENE COURT, SUITE 200	Address	8910 TERRENE COURT, SUITE 200
City-State-Zip:	BONITA SPRINGS FL 34135	City-State-Zip:	BONITA SPRINGS FL 34135
Title	SECRETARY, TREASURER, DIRECTOR		
Name	COLECLEUGH, ROBERT C		
Address	8910 TERRENE COURT, SUITE 200		
City-State-Zip:	BONITA SPRINGS FL 34135		

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: DEAN CORSONES

PRESIDENT

04/06/2017

Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 06, 2017 Secretary of State CC9330445118