

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000005610

**Entity Name:** ALTESSA II AT VASARI CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2685 HORSESHOE DR S  
215  
NAPLES, FL 34104

**Current Mailing Address:**

C/O RESORT MANAGEMENT  
2685 HORSESHOE DR S 215  
NAPLES, FL 34104 US

**FEI Number:** 57-1159770

**Certificate of Status Desired:** No

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

KLECK, TOM  
28630 ALTESSA WAY  
#101  
BONITA SPRINGS, FL 34135 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:** TOM KLECK

04/02/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ROBERTS, ALBERT  
Address 28620 ALTESSA WAY  
201  
City-State-Zip: BONITA SPRINGS FL 34135

Title TREASURER  
Name ROBERTS, JANET  
Address 28620 ALTESSA WAY  
201  
City-State-Zip: BONITA SPRNGS FL 34135

Title DIRECTOR  
Name BRANSON, RICHARD  
Address 28640 ALTESSA WAY  
#201  
City-State-Zip: BONITA SPRINGS FL 34135

Title SECRETARY  
Name NADER, ROBERT  
Address 10220 WELLINGTON DRIVE  
City-State-Zip: PLYMOUTH MI 48170

Title PRESIDENT  
Name KLECK, TOM  
Address 28630 ALTESSA WAY  
101  
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:** TOM KLECK

PRESIDENT

04/02/2015

Electronic Signature of Signing Officer/Director Detail

Date