

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000524

Entity Name: CASTLETON GARDENS CONDOMINIUM ASSOCIATION, INC.**FILED**
Mar 13, 2018
Secretary of State
CC8682318182**Current Principal Place of Business:**C/O NEWELL PROPERTY MANAGEMENT CORPORATION
5435 JAEGER ROAD #4
NAPLES, FL 34109**Current Mailing Address:**C/O NEWELL PROPERTY MANAGEMENT CORPORATION
5435 JAEGER ROAD #4
NAPLES, FL 34109 US**FEI Number: 11-3676143****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**NEWELL PROPERTY MANAGEMENT CORPORATION
5435 JAEGER ROAD #4
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:** ANTONIOS KOKKINOS**03/13/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WOONTON, ELLEN
Address 5435 JAEGER ROAD #4
City-State-Zip: NAPLES FL 34109

Title VP
Name MONCMAN, PATTIE
Address 5435 JAEGER ROAD #4
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name SPENCE, ELIZABETH
Address 5435 JAEGER ROAD #4
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name MACK, ELAINE
Address 5435 JAEGER ROAD #4
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name BERLIE, JON
Address 5435 JAEGER ROAD #4
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name DARMON, JACK
Address 5435 JAEGER ROAD #4
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name KING, RICHARD
Address 5435 JAEGER ROAD #4
City-State-Zip: NAPLES FL 34109

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: ELLEN WOONTON**PRESIDENT****03/13/2018**

Electronic Signature of Signing Officer/Director Detail

Date