## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007768

Entity Name: TARPON LANDINGS CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 22, 2019
Secretary of State
5603073605CC

## **Current Principal Place of Business:**

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

## **Current Mailing Address:**

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

FEI Number: 20-0228616 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RESORT MANAGEMENT C/O RESORT MANAGEMENT 2685 HORSESHOE DR S SUITE 215 NAPLES, FL 34104 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: ROBERT ROSENOW 04/22/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name CAPACCIO, NICHOLAS Name DRAKE, STUART

Address C/O RESORT MANAGEMENT Address C/O RESORT MANAGEMENT

2685 HORSESHOE DR S SUITE 215 2685 HORSESHOE DR S SUITE 215

City-State-Zip: NAPLES FL 34104 City-State-Zip: NAPLES FL 34104

Title DIRECTOR Title SECRETARY

Name SERBER, LINDA Name HEISLER, DONALD

Address C/O RESORT MANAGEMENT Address C/O RESORT MANAGEMENT

2685 HORSESHOE DR S SUITE 215 2685 HORSESHOE DR S SUITE 215

City-State-Zip: NAPLES FL 34104 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.