# 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000001459

Entity Name: VERONAWALK HOMEOWNERS ASSOCIATION, INC.

# Current Principal Place of Business:

8090 SORRENTO LANE, SUITE 1 NAPLES, FL 34114

## **Current Mailing Address:**

8090 SORRENTO LANE, SUITE 1 NAPLES, FL 34114 US

### FEI Number: 56-2440461

### Name and Address of Current Registered Agent:

GOEDE, ADAMCZYK, DEBOEST & CROSS, PLLC 6609 WILLOW PARK DRIVE SECOND FLOOR 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:

Electronic Signature of Registered Agent

### Officer/Director Detail :

	Title	TREASURER	Title	PRESIDENT
	Name	MILLER, ROBERT	Name	MCCAULEY, ANNE
	Address	8090 SORRENTO LANE SUITE 1	Address	8090 SORRENTO LANE SUITE 1
	City-State-Zip:	NAPLES FL 34114	City-State-Zip:	NAPLES FL 34114
	Title	VP	Title	SECRETARY
	Name	CONTALDI, JOE	Name	DEBLASIE, DEBRA
	Address	8090 SORRENTO LANE, SUITE 1	Address	8090 SORRENTO LANE, SUITE 1
	City-State-Zip:	NAPLES FL 34114	City-State-Zip:	NAPLES FL 34114
	Title	DIRECTOR	Title	GENERAL MANAGER
	Name	ROTELLA, CHARLES	Name	ORTIZ, ASHLEY
	Address	8090 SORRENTO LANE, SUITE 1	Address	8090 SORRENTO LANE, SUITE 1
	City-State-Zip:	NAPLES FL 34114	City-State-Zip:	NAPLES FL 34114

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: ASHLEY ORTIZ

GENERAL MANAGER

12/11/2019

Electronic Signature of Signing Officer/Director Detail

FILED Dec 11, 2019 Secretary of State 3353197814CC

Certificate of Status Desired: No

Date