

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04216

**Entity Name:** FOUR WINDS MARINA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

16601 STRINGFELLOW RD  
BOKEELIA, FL 33922

**Current Mailing Address:**

P. O. BOX 101508  
CAPE CORAL, FL 33910-1508 US

**FEI Number:** 59-2635791

**Certificate of Status Desired:** No

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

NEELD, ROBERT M.  
1426 SE 44TH STREET  
CAPE CORAL, FL 33904 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 M. NEELD

02/02/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            AHRENS, PATRICIA  
Address        P. O. BOX 586  
City-State-Zip: BOKEELIA FL 33922

Title            SECRETARY, DIRECTOR  
Name            DYER, JANICE L.  
Address        16601 STRINGFELLOW ROAD  
                  UNIT 103  
City-State-Zip: BOKEELIA FL 33922

Title            TREASURER, DIRECTOR  
Name            GEDKO, JOYCE  
Address        16611 STRINGFELLOW ROAD  
                  UNIT 205  
City-State-Zip: BOKEELIA FL 33922

*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:** PATRICIA AHRENS

PRESIDENT

02/02/2023

Electronic Signature of Signing Officer/Director Detail

Date