

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004615

**Entity Name:** THE RESIDENCE I AT NAPLES BAY RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1500 5TH AVENUE SOUTH  
NAPLES, FL 34102

**Current Mailing Address:**

1500 5TH AVENUE S  
NAPLES, FL 34102

**FEI Number:** 20-4759395

**Certificate of Status Desired:** No

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

JASON MIKES  
9130 GALERIA COURT  
SUITE 330  
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

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name JOHN, WEBB D  
Address 342 RIVERGREEN LANE  
City-State-Zip: BOWLING GREEN KY 42103

Title PRESIDENT  
Name D'AGOSTINO, ALFRED  
Address 133 CUMBERLAND COURT  
City-State-Zip: PARAMUS NJ 07652

Title TREASURER  
Name FRANK, DELGADO  
Address 3530 KRAFT ROAD STE 204  
City-State-Zip: NAPLES FL 34105

Title VP  
Name FRAZITTA, ROBERT  
Address P.O. BOX 2307  
City-State-Zip: NAPLES FL 34106

Title SECRETARY  
Name PEZESHKAN, ALEXANDER  
Address 3530 KRAFT ROAD  
SUITE 204  
City-State-Zip: NAPLES FL 34105

*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: FRANK DELGADO**

**TREASURER**

**04/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date