

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004615

Entity Name: THE RESIDENCE I AT NAPLES BAY RESORT CONDOMINIUM ASSOCIATION, INC.**FILED**
Mar 26, 2019
Secretary of State
4720255384CC**Current Principal Place of Business:**1500 5TH AVE SOUTH
NAPLES, FL 34102**Current Mailing Address:**1500 5TH AVE SOUTH
NAPLES, FL 34102 US**FEI Number: 20-4759395****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GFPAC SERVICES LLC
5551 RIDGEWOOD DR
SUITE 501
NAPLES, FL 34108 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: GRANT FRIDKIN****03/26/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title	TREASURER
Name	MACIVOR, THOMAS A
Address	1500 5TH AVE SOUTH SUITE 111
City-State-Zip:	NAPLES FL 34102

Title	VP
Name	ROBERTSON, JOHN
Address	1500 5TH AVE SOUTH
City-State-Zip:	NAPLES FL 34102

Title	SECRETARY
Name	NATHANSON, DAWN
Address	1500 5TH AVE SOUTH
City-State-Zip:	NAPLES FL 34102

Title	DIRECTOR
Name	BARTH, GARY
Address	1500 5TH AVE SOUTH
City-State-Zip:	NAPLES FL 34102

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: THOMAS MACIVOR**TREASURER****03/26/2019**

Electronic Signature of Signing Officer/Director Detail

Date