

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

DOCUMENT# N05000006047

**Entity Name:** BUCKINGHAM ESTATES COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

12734 KENWOOD LANE, STE 49  
FORT MYERS, FL 33907

**Current Mailing Address:**

12734 KENWOOD LANE, STE 49  
FORT MYERS, FL 33907 US

**FEI Number:** 20-2981238

**Certificate of Status Desired:** No

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

TROPICAL ISLES MANAGEMENT  
12734 KENWOOD LANE, STE 49  
FORT MYERS, FL 33907 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:** TROPICAL ISLES MNGMT

04/13/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CODDING, JAMES MIKE  
Address 12734 KENWOOD LANE, STE 49  
City-State-Zip: FORT MYERS FL 33907

Title TREASURER  
Name CLARK, RON  
Address 12734 KENWOOD LANE, STE 49  
City-State-Zip: FORT MYERS FL 33907

Title SECRETARY  
Name REID, LEIGH  
Address 12734 KENWOOD LANE, STE 49  
City-State-Zip: FORT MYERS FL 33907

Title VP  
Name SIMMONS-BROWN, MICHELLE A  
Address 12734 KENWOOD LANE, STE 49  
City-State-Zip: FORT MYERS FL 33907

Title VP  
Name FARRER, MICHELLE  
Address 12734 KENWOOD LANE, STE 49  
City-State-Zip: FORT MYERS FL 33907

*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:** JAMES MIKE CODDING

PRESIDENT

04/13/2023

Electronic Signature of Signing Officer/Director Detail

Date