

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05799

**FILED
Apr 10, 2019
Secretary of State
0191240064CC**

Entity Name: SUNSET COVE AT CHOKOLOSKEE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

STATE ROAD 29
CHOKOLOSKEE, FL 34138

Current Mailing Address:

COLLIER FINANCIAL, INC.
4985 TAMIAMI TRAIL E.
NAPLES, FL 34113 US

FEI Number: 65-0142134

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HART, STEPHEN P
COLLIER FINANCIAL INC
4985 TAMIAMI TRAIL E
NAPLES, FL 34113 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 PD
Name PRAUGHT, BRAD
Address C/O COLLIER FINANCIAL, INC
4985 TAMIAMI TRAIL E
City-State-Zip: NAPLES FL 34113

Title VPD
Name WITTINE, JIM
Address C/O COLLIER FINANCIAL, INC
4985 TAMIAMI TRAIL E
City-State-Zip: NAPLES FL 34113

Title TD
Name KASHUBA, JOSEPH
Address C/O COLLIER FINANCIAL, INC.
4985 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

Title SD
Name HILL, ANDY
Address C/O COLLIER FINANCIAL, INC
4985 TAMIAMI TRAIL E.
City-State-Zip: NAPLES FL 34113

Title ASST. SECRETARY, D
Name STACKER, JACK
Address C/O COLLIER FINANCIAL, INC
4985 TAMIAMI TRAIL E
City-State-Zip: NAPLES FL 34113

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: BRAD PRAUGHT

PRESIDENT

04/10/2019

Electronic Signature of Signing Officer/Director Detail

Date