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.

PRESIDENT

SIGNATURE: SCOTT BROOKS

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: BONITA SPRINGS FL 34134

Officer/Director Detail :				
Title	DP	Title	DVP	
Name	BROOKS, SCOTT	Name	MORTON, KIMBERLY	
Address	24311 WALDEN CENTER DRIVE STE 300	Address	24311 WALDEN CENTER DRIVE STE 300	
City-State-Zip:	BONITA SPRINGS FL 34134	City-State-Zip:	BONITA SPRINGS FL 34134	
Title	S/T			
Name	RAY, LAURA			
Address	24311 WALDEN CENTER DRIVE STE 300			

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.

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

5080 ANNUNCIATION CIRCLE 101 AVE MARIA, FL 34142

Current Mailing Address:

5080 ANNUNCIATION CIRCLE., #101 AVE MARIA, FL 34142 US

FEI Number: 26-0333866

NAPLES, FL 34109 US

GOEDE, ADAMCZYK & DEBOEST, PLLC

SIGNATURE: NATHAN MORRIS

C/O GOEDE, ADAMCZYK & DEBOEST, PLLC 8950 FONTANA DEL SOL WAY STE100

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0600006216

Entity Name: AVALON PARK AT AVE MARIA NEIGHBORHOOD ASSOCIATION. INC.

Current Principal Place of Business:

C/O FIRSTSERVICE RESIDENTIAL

FILED Jan 27, 2023 Secretary of State 2335515556CC

> 01/27/2023 Date

Certificate of Status Desired: No

01/27/2023