

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005897

FILED
Jan 14, 2015
Secretary of State
CC4594262284

Entity Name: FLAMINGO HIDEAWAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O CRAIG S. BOYD, SECRETARY
381 6TH AVE. S.
NAPLES, FL 34102

Current Mailing Address:

C/O CRAIG S. BOYD, SECRETARY
381 6TH AVE. S.
NAPLES, FL 34102

FEI Number: 26-0364849

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYD, CRAIG
381 6TH AVE. S.
NAPLES, FL 34102 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 D
Name FAULKNER, GAIL C
Address 1840 HUNTINGTON ROAD
City-State-Zip: HUNTINGDON VALLEY PA 19006

Title D
Name BOYD, CRAIG
Address 381 6TH AVENUE SOUTH
City-State-Zip: NAPLES FL 34102

Title D
Name CAMPBELL, MICHAEL
Address 417 S. HI LUSI AVENUE
City-State-Zip: MOUNT PROSPECT IL 60056

Title D
Name LAUER, TOM
Address 18 ORDWAY ROAD
City-State-Zip: WELLSLEY MA 02481

Title D
Name JOHNSON, HENRY
Address 570 WEST LAKE DRIVE
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: CRAIG S. BOYD

SECRETARY

01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date