2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1000003072

Entity Name: ALI'I NUI VILLAS CONDOMINIUM ASSOCIATION, INC.

FILED Feb 02, 2022 **Secretary of State** 5167926716CC

Current Principal Place of Business:

215 CELEBRATION PLACE

SUITE 300

CELEBRATION, FL 34747

Current Mailing Address:

1851 COMMUNITY DRIVE

LAKE BUENA VISTA, FL 32830 US

FEI Number: 27-2221327 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC. 515 EAST PARK AVENUE 2ND FL

TALLAHASSEE, FL 32301 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: DELANIE CASE 02/02/2022

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Name

Name

DIRECTOR & PRESIDENT DIRECTOR & VICE PRESIDENT Title Title

DIERCKSEN, WILLIAM SAKASKE, SHANNON Name Name

215 CELEBRATION PLACE 215 CELEBRATION PLACE Address Address

> SUITE 300 SUITE 300

City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR, VICE PRESIDENT & Title VICE PRESIDENT & TREASURER

> SECRETARY Name HEALY, ELIZABETH CHANG, YVONNE

215 CELEBRATION PLACE Address 215 CELEBRATION PLACE Address

SUITE 300 SUITE 300

City-State-Zip: CELEBRATION FL 34747 City-State-Zip: CELEBRATION FL 34747

Title VICE PRESIDENT & ASSISTANT **DIRECTOR, VICE PRESIDENT &** Title **TREASURER**

ASSISTANT SECRETARY Name KEISER, KRISTINE

ARMOR, ALISON Name

215 CELEBRATION PLACE Address Address

215 CELEBRATION PLACE SUITE 300

SUITE 300 City-State-Zip: CELEBRATION FL 34747

City-State-Zip: CELEBRATION FL 34747

Title DIRECTOR

215 CELEBRATION PLACE Address

SUITE 300

NIEMAN, LEIGH ANNE

CELEBRATION FL 34747 City-State-Zip:

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.

02/02/2022 SIGNATURE: YVONNE CHANG DIRECTOR