## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000003156

Entity Name: MANGROVE WALK ON HARBOUR ISLE CONDOMINIUM

ASSOCIATION, INC.

**Current Principal Place of Business:** 

4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103

**Current Mailing Address:** 

4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 US

FEI Number: 45-3483463 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMPASS MANAGEMENT GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 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: COMPASS GROUP 04/29/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name MENDOZA, ROBERT Name SETTLAGE, A.CRAIG

Address 4851 TAMIAMI TRAIL N STE 400 Address 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

TitleSECRETARYTitleTREASURERNameMERRITT, LORINameMUZIO, DAVE

Address 4851 TAMIAMI TRAIL N STE 400 Address 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name LOWRY, JACK

Address 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103

SIGNATURE: ROBERT MENDOZA

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/29/2015

FILED Apr 29, 2015

**Secretary of State** 

CC8987988180

Date