

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000011076

**FILED**  
**Feb 20, 2014**  
**Secretary of State**  
**CC4915730185**

**Entity Name:** 2121 WEST FIRST STREET CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2121 WEST FIRST STREET  
FORT MYERS, FL 33901

**Current Mailing Address:**

2121 WEST FIRST STREET  
FORT MYERS, FL 33901

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

HL STATUTORY AGENT, INC.  
800 LAUREL OAK DRIVE, SUITE 600  
NAPLES, FL 34108 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           DPT  
Name           SCARMOZZINO, JAMES M  
Address        2121 WEST FIRST STREET  
City-State-Zip: FORT MYERS FL 33901

Title           DV  
Name           KUSHNER, JEFFREY  
Address        2121 WEST FIRST STREET  
City-State-Zip: FORT MYERS FL 33901

Title           D  
Name           COOPER, ROBERT A  
Address        2121 WEST FIRST STREET  
City-State-Zip: FORT MYERS FL 33901

Title           V  
Name           WEBB, DENNIS L  
Address        2121 WEST FIRST STREET  
City-State-Zip: FORT MYERS FL 33901

Title           S  
Name           KUSHNER, ROBERTA D  
Address        2121 WEST FIRST STREET  
City-State-Zip: FORT MYERS FL 33901

*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: COOPER, ROBERT A**

**D**

**02/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date