

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

DOCUMENT# N17912

**Entity Name:** ARLINGTON PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

SANDY HOLLOW LANE  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

C/O CFS-REPPERT  
13151 KINGS POINT DR #11A  
FORT MYERS, FL 33919

**FEI Number:** 65-0075329

**Certificate of Status Desired:** No

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

MCCLURE, ROBERT P.A.  
3511 BONITA BAY BLVD  
SUITE 101  
BONITA SPRINGS, FL 34134 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            PRESIDENT  
Name            BAYLOR, BONNIE  
Address        24896 CARNOUSTIE CT  
City-State-Zip: BONITA SPRINGS FL 34135

Title            VP  
Name            SITTA, DONALD R  
Address        9100 CAROLINA ST  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            WATSCHKE, DORIS  
Address        21549 BERWITICH RUN  
City-State-Zip: ESTERO FL 33928

Title            SECRETARY  
Name            CRAWFORD, SHARON  
Address        10107 SANDY HOLLOW LN  
                    301  
City-State-Zip: BONITA SPRINGS FL 34135

Title            TREASURER  
Name            RICHTER, FREDERICK  
Address        10101 SANDY HOLLOW LN  
                    103  
City-State-Zip: BONITA SPRINGS FL 34135

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: BONNIE BAYLOR**

**PRESIDENT**

**03/22/2014**

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

\_\_\_\_\_  
Date