

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000003275

Entity Name: RESIDENCES AT 5TH & 5TH CONDOMINIUM ASSOCIATION, INC.**FILED**
Apr 05, 2021
Secretary of State
2347329645CC**Current Principal Place of Business:**1044 CASTELLO DRIVE
STE. 206
NAPLES, FL 34103**Current Mailing Address:**1044 CASTELLO DRIVE
STE. 206
NAPLES, FL 34103 US**FEI Number: 30-1065311****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SOUTHWEST PROPERTY MANAGEMENT OF CENTRAL
FLORIDA, INC.
1044 CASTELLO DRIVE, SUITE 206
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR	Title	VP
Name	MCCABE, PHILIP J	Name	MCMUNN, TONY
Address	1044 CASTELLO DRIVE STE. 206	Address	1044 CASTELLO DRIVE STE. 206
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103
Title	SECRETARY, TREASURER	Title	PRESIDENT
Name	BEACH, SUSANNAH	Name	SHEELEIGH, KATHY
Address	1044 CASTELLO DRIVE STE. 206	Address	1044 CASTELLO DRIVE STE. 206
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103

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: KATHY SHEELEIGH**PRESIDENT****04/05/2021**

Electronic Signature of Signing Officer/Director Detail

Date