## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N22064

Entity Name: LE PARC CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

4951 GULF SHORE BLVD N MANAGER'S OFFICE NAPLES, FL 34103

## **Current Mailing Address:**

4951 GULF SHORE BLVD N MANAGER'S OFFICE NAPLES, FL 34103 US

## FEI Number: 65-0182454

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

PECK, DANIEL D C/O P 5200 TAMIAMI TRAIL N. #101 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

#### **Officer/Director Detail :**

Title	VP	Title	PRESIDENT
Name	GAERTNER, DEBORAH	Name	CURTIN, TIMOTHY
Address	4951 GULF SHORE BLVD N #601	Address	4951 GULF SHORE BLVD N # PH 201
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103
Title	TREASURER	Title	DIRECTOR
Name	JONES, DAVID	Name	SCHRECK, DANIEL J.
Address	4951 GULF SHORE BLVD N #501	Address	4951 GULF SHORE BLVD N #PH301
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103
Title	DIRECTOR	Title	SECRETARY
Title Name	DIRECTOR ARCH, TERRY B.	Title Name	SECRETARY KISTLER, FRANK
			KISTLER, FRANK 4951 GULF SHORE BLVD N.
Name Address	ARCH, TERRY B.	Name Address	KISTLER, FRANK
Name Address	ARCH, TERRY B. 4951 GULF SHORE BLVD N #701	Name Address	KISTLER, FRANK 4951 GULF SHORE BLVD N. 1603
Name Address City-State-Zip:	ARCH, TERRY B. 4951 GULF SHORE BLVD N #701 NAPLES FL 34103	Name Address	KISTLER, FRANK 4951 GULF SHORE BLVD N. 1603
Name Address City-State-Zip: Title	ARCH, TERRY B. 4951 GULF SHORE BLVD N #701 NAPLES FL 34103 DIRECTOR	Name Address	KISTLER, FRANK 4951 GULF SHORE BLVD N. 1603

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.

PRESIDENT

## SIGNATURE: TIMOTHY CURTIN

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 22, 2021 Secretary of State 7868366288CC

Certificate of Status Desired: No

Date