

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25306

Entity Name: COUNTRYSIDE HOMEOWNERS ASSOCIATION III, INC.**Current Principal Place of Business:**PARAMOUNT PROPERTY MANAGEMENT OF NAPLES
15275 COLLIER BLVD #201-278
NAPLES, FL 34119**Current Mailing Address:**PARAMOUNT PROPERTY MANAGEMENT OF NAPLES
15275 COLLIER BLVD #201-278
NAPLES, FL 34119 US**FEI Number:** 59-2918443**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PARAMOUNT PROPERTY MANAGEMENT OF NAPLES
PARAMOUNT PROPERTY MANAGEMENT OF NAPLES
15275 COLLIER BLVD #201-278
NAPLES, FL 34119 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:** CHRISTINE LABUZIENSKI

04/27/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title PRES
Name POULOS, ROBERT
Address 264 ST JAMES WAY
City-State-Zip: NAPLES FL 34104Title VP
Name LEYNE, THOMAS
Address 212 ST. JAMES WAY
City-State-Zip: NAPLES FL 34104Title DIRECTOR
Name WARNER, RONALD
Address 257 ST JAMES WAY
City-State-Zip: NAPLES FL 34104Title SECRETARY
Name DIVENERE, RAFFAELLA
Address 120 GRANVILLE COURT
City-State-Zip: NAPLES FL 34104Title TREASURER
Name DELLA ROCCO, FELIX
Address 230 ST JAMES WAY
City-State-Zip: NAPLES FL 34104

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: ROBERT POULOS

PRESIDENT

04/27/2021

Electronic Signature of Signing Officer/Director Detail

Date