

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29220

FILED
Jan 17, 2020
Secretary of State
9103471283CC

Entity Name: CANTERBURY VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR. SOUTH SUITE 215
NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR. SOUTH SUITE 215
NAPLES, FL 34104 US

FEI Number: 65-0089635

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, TODD B ESQUIRE
LINDSAY & ALLEN, PLLC
13180 LIVINGSTON ROAD, SUITE 206
NAPLES, FL 34109 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: TODD B. ALLEN, ESQUIRE

01/17/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PRATTE, CYNTHIA D.
Address C/O RESORT MANAGEMENT
 2685 HORSESHOE DR. SOUTH SUITE
 215
City-State-Zip: NAPLES FL 34104

Title SECRETARY / TREASURER
Name POLLOCK, VICTORIA
Address C/O RESORT MANAGEMENT
 2685 HORSESHOE DR. SOUTH SUITE
 215
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name DELORENZO, LEONARD
Address C/O RESORT MANAGEMENT
 2685 HORSESHOE DR. SOUTH SUITE
 215
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name CUELLAR, JOSE
Address C/O RESORT MANAGEMENT
 2685 HORSESHOE DR. SOUTH SUITE
 215
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name AIELLO, PHIL
Address C/O RESORT MANAGEMENT
 2685 HORSESHOE DR. SOUTH SUITE
 215
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name SIERRA, REBECCA
Address C/O RESORT MANAGEMENT
 2685 HORSESHOE DR. SOUTH SUITE
 215
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name JOHNS, ANDREW
Address C/O RESORT MANAGEMENT
 2685 HORSESHOE DR. SOUTH SUITE
 215
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: CYNTHIA PRATTE

PRESIDENT

01/17/2020

