2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29220

Entity Name: CANTERBURY VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5495 BRYSON DRIVE, SUITE #412
NAPLES, FL 34109

Current Mailing Address:

5495 BRYSON DRIVE, SUITE #412
NAPLES, FL 34109 US

FEI Number: 65-0089635

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POTTER, PATRICIA JESQ.
SIESKY, PILON & POTTER
3435 10TH STREET N, STE 303
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	PRESIDENT		Title	VP
Name	BARKER , CAROLYN		Name	POTTER , MICHAEL
Address	5495 BRYSON DRIVE, SUITE #412		Address	5495 BRYSON DRIVE, SUITE #412
City-State-Zip:	NAPLES FL 34109		City-State-Zip:	NAPLES FL 34109
Title	SECRETARY / TREASURER		Title	DIRECTOR
Name	MEDFORD, KENNETH		Name	WINTERS , GIGI
Address	5495 BRYSON DRIVE, SUITE #412		Address	5495 BRYSON DRIVE, SUITE #412
City-State-Zip:	NAPLES FL 34109		City-State-Zip:	NAPLES FL 34109
Title	DIRECTOR		Title	DIRECTOR
Name	WINTERS , LISA		Name	MELLON, RICHARD
Address	5495 BRYSON DRIVE, SUITE #412		Address	5495 BRYSON DRIVE SUITE 412
City-State-Zip:	NAPLES FL 34109		City-State-Zip:	NAPLES FL 34109

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: CAROLYN BARKER   PRESIDENT   04/17/2014

Electronic Signature of Signing Officer/Director Detail   Date