

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N38022

**Entity Name:** MANGROVE BAY OF LEE COUNTY CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 25, 2020**  
**Secretary of State**  
**1859786339CC**

**Current Principal Place of Business:**

10231 METRO PKWY  
STE 204  
FORT MYERS, FL 33966

**Current Mailing Address:**

10231 METRO PKWY  
STE 204  
FORT MYERS, FL 33966 US

**FEI Number: 65-0191542**

**Certificate of Status Desired: No**

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

SWFL CAM SERVICES  
10231 METRO PKWY  
STE 204  
FORT MYERS, FL 33966 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: CRAIG VALENTINE**

**04/25/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name LANZ, MARC  
Address 10231 METRO PKWY  
STE 204  
City-State-Zip: FORT MYERS FL 33966

Title PRESIDENT  
Name COLLINS, SCOTT  
Address 10231 METRO PKWY  
STE 204  
City-State-Zip: FORT MYERS FL 33966

Title VP  
Name KRUTZ, KEVIN  
Address 10231 METRO PKWY  
STE 204  
City-State-Zip: FORT MYERS FL 33966

Title TREASURER  
Name KNOWLES, CORY  
Address 10231 METRO PKWY  
STE 204  
City-State-Zip: FORT MYERS FL 33966

Title SECRETARY  
Name KLEIN, ALLEN  
Address C/O SWFL CAM SERVICES  
10231 METRO PKWY #204  
City-State-Zip: FORT MYERS FL 33966

*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: CORY KNOWLES**

**TREASURER**

**04/25/2020**

Electronic Signature of Signing Officer/Director Detail

Date