

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44157

Entity Name: ARBOR TRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1000 ARBOR LAKE DRIVE
NAPLES, FL 34110

Current Mailing Address:

1000 ARBOR LAKE DRIVE
NAPLES, FL 34110

FEI Number: 58-2006826

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
4001 TAMiami TRAIL NORTH, SUITE 410
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
Name FOOTE, WILLIAM MR.
Address 706 ARBOR LAKE DR
City-State-Zip: NAPLES FL 34110

Title SECRETARY
Name ZIMMER, SCOTT MR.
Address 900 ARBOR LAKE DRIVE, #506
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name DEPRISCO, LOUIS MR.
Address 900 ARBOR LAKE DRIVE, #501
City-State-Zip: NAPLES FL 34110

Title VICE PRESIDENT
Name ALEXIOU, JEAN MRS.
Address 201 ARBOR LAKE DRIVE, #205
City-State-Zip: NAPLES FL 34110

Title TREASURER
Name SCHMIDT, RICHARD MR.
Address 606 ARBOR LAKE DRIVE
City-State-Zip: NAPLES FL 34110

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: SCOTT ZIMMER

SECRETARY

01/26/2015

Electronic Signature of Signing Officer/Director Detail

Date