

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000004118

**FILED**  
**Jun 29, 2021**  
**Secretary of State**  
**4732881230CC**

**Entity Name:** ST. PIERRE AT WATERPARK PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6825 GRENADIER BLVD.  
ATTN: MANAGEMENT OFFICE  
NAPLES, FL 34108

**Current Mailing Address:**

6825 GRENADIER BLVD.  
ATTN: MANAGEMENT OFFICE  
NAPLES, FL 34108 US

**FEI Number: 65-0438869**

**Certificate of Status Desired: Yes**

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

EVANS, JERRY  
6825 GRENADIER BLVD.  
ATTN: MANAGEMENT OFFICE  
NAPLES, FL 34108 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: JERRY EVANS**

**06/29/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           NUCCIO, GARY  
Address        6825 GRENADIER BLVD  
                  ATTN: MANAGEMENT OFFICE  
City-State-Zip: NAPLES FL 34108

Title           DIRECTOR  
Name           GOULD, RANDY  
Address        6825 GRENADIER BLVD  
                  ATTN: MANAGEMENT OFFICE  
City-State-Zip: NAPLES FL 34108

Title           PRESIDENT  
Name           RUCHTY, NICK  
Address        6825 GRENADIER BLVD.  
                  ATTN: MANAGEMENT OFFICE  
City-State-Zip: NAPLES FL 34108

Title           SECRETARY  
Name           NELSON, MARISSA  
Address        6825 GRENADIER BLVD.  
                  ATTN: MANAGEMENT OFFICE  
City-State-Zip: NAPLES FL 34108

Title           VP  
Name           BOYLE, FRED  
Address        6825 GRENADIER BLVD.  
                  ATTN: MANAGEMENT OFFICE  
City-State-Zip: NAPLES FL 34108

*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: NICK RUCHTY**

**PRESIDENT**

**06/29/2021**

Electronic Signature of Signing Officer/Director Detail

Date