## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000004118

Entity Name: ST. PIERRE AT WATERPARK PLACE CONDOMINIUM

ASSOCIATION, INC.

**Current Principal Place of Business:** 

4306 ARNOLD AVENUE NAPLES, FL 34104

**Current Mailing Address:** 

P.O. BOX 110339 NAPLES, FL 34108 US

FEI Number: 65-0438869 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUETER, BEVERLY 4306 ARNOLD AVE NAPLES, FL 34104 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

FILED Apr 13, 2013

**Secretary of State** 

CC4913528381

Officer/Director Detail:

Title DS Title DP

Name MOUNT, THOMAS Name MACCHI, LEONOR

Address 6825 GRENADIER BLVD #704 Address 6825 GRENADIER BLVD #505

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108

Title D Title DVP

Name HARAKAL, THOMAS Name LEICHTER, ERIC

Address 6825 GRENADIER BLVD. #1203 Address 6825 GRENADIER BLVD. #1404

City-State-Zip: NAPLES FL 34108 City-State-Zip: NAPLES FL 34108

Title DT

Name HOMSTAD, MAUREEN

SIGNATURE: LEONOR MACCHI

Address 6825 GRENADIER BLVD. #1101

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/13/2013