

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005797

Entity Name: AMETHYST CLUB AT SAPPHIRE LAKES CONDOMINIUM ASSOCIATION, INC.

FILED
Mar 08, 2017
Secretary of State
CC4715124510

Current Principal Place of Business:

2685 HORSESHOE DR S.
#215
NAPLES, FL 34104

Current Mailing Address:

C/O RESORT MANAGEMENT
2685 HORSESHOE DR S #215
NAPLES, FL 34104 US

FEI Number: 65-0581135

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RESORT MANAGEMENT
2685 HORSESHOE DR S
#215
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: ROBERT ROSENOW

03/08/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name MEARS, REGINALD
Address 550 GABRIEL CIR. #3102
City-State-Zip: NAPLES FL 34104

Title VP
Name MCEVOY, DENNIS
Address 516 GABRIEL CIRCLE
UNIT # 3206
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name HURLEY, THOMAS
Address 120 FLINT PATH
City-State-Zip: SYRACUSE NY 13219

Title SECRETARY
Name TAPLEY, JOEL
Address 516 GABRIEL CIRCLE #3208
City-State-Zip: NAPLES FL 34104

Title TREASURER
Name DANIEL, LINDA
Address 550 GABRIEL CIRCLE #3101
City-State-Zip: NAPLES FL 34104

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: REGINALD MEARS

PRESIDENT

03/08/2017

Electronic Signature of Signing Officer/Director Detail

Date