

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001493

Entity Name: NAUTICA HOMEOWNERS ASSOCIATION, INC.

FILED
Mar 28, 2022
Secretary of State
9284011738CC

Current Principal Place of Business:

C/O QUALITY MANAGEMENT GROUP
6600 W ROGERS CIRCLE SUITE 9
BOCA RATON, FL 33487

Current Mailing Address:

C/O QUALITY MANAGEMENT GROUP
6600 W ROGERS CIRCLE SUITE 9
BOCA RATON, FL 33487 US

FEI Number: 65-0640300

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRAVIT ESQ., CORY
2101 NW CORPORATE BLVD.
410
BOCA RATON, FL 33431 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: CORY KRAVIT ESQ.

03/28/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name SKARECKI, NICHOLAS
Address C/O QUALITY MANAGEMENT GROUP
6600 W ROGERS CIRCLE SUITE 9
City-State-Zip: BOCA RATON FL 33487

Title VP
Name DAVIS, ANDREW
Address C/O QUALITY MANAGEMENT GROUP
6600 W ROGERS CIRCLE SUITE 9
City-State-Zip: BOCA RATON FL 33487

Title TREASURER
Name BRIGGS, MATTHEW
Address C/O QUALITY MANAGEMENT GROUP
6600 W ROGERS CIRCLE SUITE 9
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR
Name ALONSO, ROBERTO
Address C/O QUALITY MANAGEMENT GROUP
6600 W ROGERS CIRCLE SUITE 9
City-State-Zip: BOCA RATON FL 33487

Title SECRETARY
Name SHORE, CARLA
Address C/O QUALITY MANAGEMENT GROUP
6600 W ROGERS CIRCLE SUITE 9
City-State-Zip: BOCA RATON FL 33487

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: NICHOLAS SKARECKI

PRESIDENT

03/28/2022

Electronic Signature of Signing Officer/Director Detail

Date