

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002865

Entity Name: BUCCANEER HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**2210 TAMiami TRAIL
NORTH FORT MYERS, FL 33917**Current Mailing Address:**P.O. BOX 3368
NORTH FORT MYERS, FL 33918 US**FEI Number:** 65-0720458**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HANSON, MARK JESQ
2033 MAIN ST
SUITE 403
SARASOTA, FL 34237 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:** MARK A HANSON

03/21/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MULLINS, JAMES
Address 975 AVANTI WAY BLVD
City-State-Zip: NORTH FORT MYERS FL 33917

Title VP
Name SULLIVAN, DOUG
Address 57 GALLEON DR
City-State-Zip: NORTH FORT MYERS FL 33917

Title SECRETARY
Name WEIGANDT, KATHLEEN
Address 511 AVANTI WAY
City-State-Zip: NORTH FORT MYERS FL 33917

Title TREASURER
Name SHOEMAKER, ANITA
Address 925 STRONGBOX LN
City-State-Zip: NORTH FORT MYERS FL 33917

Title DIRECTOR
Name SCHOFIELD, JO
Address 489 AVANTI WAY BLVD
City-State-Zip: NORTH FORT MYERS FL 33917

Title DIRECTOR
Name PETTIT, EMMA
Address 434 HIDDEN COVE RD
City-State-Zip: N FORT MYERS FL 33917

Title DIRECTOR
Name STEARNS, ELOISE
Address 580 PLAZA DEL SOL
City-State-Zip: N FORT MYERS FL 33917

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: KATHLEEN WEIGANDT

SECRETARY

03/21/2022

Electronic Signature of Signing Officer/Director Detail

Date