2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002865

Entity Name: BUCCANEER HOMEOWNERS' ASSOCIATION, INC.

FILED Feb 17, 2018 Secretary of State CC5967390024

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: No

Name and Address of Current Registered Agent:

COLLINS, LEE JESQ 529 VERSAILLES DR. SUITE 103 MAITLAND, FL 32751 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

Officer/Director Detail:

TitlePRESIDENTTitleSECRETARYNamePETTIT, EMMANameGLABERE, ANNAddress434 HIDDEN COVEAddress314 BLUE BEARD DR

City-State-Zip: NORTH FORT MYERS FL 33917 City-State-Zip: NORTH FORT MYERS FL 33917

Title TREASURER Title DIRECTOR

NameFOSTER, GORDONNameCUNNINGHAM, DAVIDAddress316 DOUBLOON DRAddress478 AVANTI WAY BLVD

City-State-Zip: NORTH FORT MYERS FL 33917 City-State-Zip: NORTH FORT MYERS FL 33917

Title DIRECTOR Title DIRECTOR

Name SCHMIDT, KARL Name REID, ROBERT L

Address 40 GALLEON Address 454 AVANTI WAY BLVD

City-State-Zip: NORTH FORT MYERS FL 33917 City-State-Zip: NORTH FORT MYERS FL 33917

Title DIRECTOR

Name SMITH, RICHARD L

Address 849 FRENCHMENS CREEK

City-State-Zip: NORTH 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: GORDON FOSTER TREASURER 02/17/2018

Electronic Signature of Signing Officer/Director Detail

Date