

2016 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:** 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 :**

Title	PRESIDENT
Name	VER HAAGH, KEITH
Address	764 PIRATES REST RD
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	VP
Name	STEELE, MARGARET
Address	689 BRIGANTINE BLVD
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	2ND VICE PRESIDENT
Name	PRINGLE, ROY
Address	71 JOSE GASPAR DR.
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	SECRETARY
Name	MEYER, PATRICIA
Address	466 AVANTI WAY BLVD
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	TREASURER
Name	SCULLIN, JO ANN LYNN
Address	817 STRONGBOX LN, FL 33917
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: JO ANN LYNN SCULLIN

TREASURER

02/09/2016

Electronic Signature of Signing Officer/Director Detail_____
Date