

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004735

Entity Name: ARIELLE AT PELICAN MARSH CONDOMINIUM ASSOCIATION, INC.**FILED**
Apr 30, 2025
Secretary of State
8581404330CC**Current Principal Place of Business:**4001 TAMIAMI TRAIL N
SUITE 401
NAPLES, FL 34103**Current Mailing Address:**C/O BECKER & POLIAKOFF
4001 TAMIAMI TRAIL N SUITE 401
NAPLES , FL 34103 US**FEI Number:** 65-0826652**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MULLER , DAVID
C/O BECKER & POLIAKOFF
4001 TAMIAMI TRAIL N SUITE 401
NAPLES , FL 34103 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:** DAVID MULLER

04/30/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GOMES, RUSSELL
Address C/O BECKER & POLIAKOFF
 4001 TAMIAMI TRAIL N SUITE 401
City-State-Zip: NAPLES FL 34103

Title VP
Name GIBBS, HUGH
Address C/O BECKER & POLIAKOFF
 4001 TAMIAMI TRAIL N SUITE 401
City-State-Zip: NAPLES FL 34103

Title TREASURER
Name BRADSHAW, PETER
Address C/O BECKER & POLIAKOFF
 4001 TAMIAMI TRAIL N SUITE 401
City-State-Zip: NAPLES FL 34103

Title SECRETARY
Name D'ORSI, CHERYL
Address C/O BECKER & POLIAKOFF
 4001 TAMIAMI TRAIL N SUITE 401
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name EBLING, GAIL
Address C/O BECKER & POLIAKOFF
 4001 TAMIAMI TRAIL N SUITE 401
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name CANDICE, CALABRO
Address C/O BECKER & POLIAKOFF
 4001 TAMIAMI TRAIL N SUITE 401
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name BERMAN , SCOTT
Address C/O BECKER & POLIAKOFF
 4001 TAMIAMI TRAIL N SUITE 401
City-State-Zip: NAPLES FL 34103

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: RUSSELL GOMES

PRESIDENT

04/30/2025

Electronic Signature of Signing Officer/Director Detail

Date