

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004735

FILED
Mar 28, 2023
Secretary of State
563101113CC

Entity Name: ARIELLE AT PELICAN MARSH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1044 CASTELLO DRIVE, SUITE 206
NAPLES, FL 34103

Current Mailing Address:

1044 CASTELLO DRIVE, SUITE 206
NAPLES, FL 34103 US

FEI Number: 65-0826652

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEACREST SOUTHWEST
1044 CASTELLO DRIVE, SUITE 206
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: BRYAN FOWLER

03/28/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GOMES, RUSSELL
Address 1044 CASTELLO DRIVE, SUITE 206
City-State-Zip: NAPLES FL 34103

Title VP
Name GIBBS, HUGH
Address 1044 CASTELLO DRIVE, SUITE 206
City-State-Zip: NAPLES FL 34103

Title TREASURER
Name BRADSHAW, PETER
Address 1044 CASTELLO DRIVE, SUITE 206
City-State-Zip: NAPLES FL 34103

Title SECRETARY
Name D'ORSI, CHERYL
Address 1044 CASTELLO DRIVE, SUITE 206
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name EBLING, GAIL
Address 1044 CASTELLO DRIVE, SUITE 206
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name ROSENTHAL, BONNIE
Address 1044 CASTELLO DRIVE, SUITE 206
City-State-Zip: NAPLES FL 34103

Title DIRECTOR
Name CANDICE, CALABRO
Address 1044 CASTELLO DRIVE, SUITE 206
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

03/28/2023

Electronic Signature of Signing Officer/Director Detail

Date