

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005949

Entity Name: SOUTHWEST PROFESSIONAL HEALTH PARK OWNERS ASSOCIATION, INC.

FILED
Apr 05, 2019
Secretary of State
3749988346CC

Current Principal Place of Business:

SW HEALTH PKWY
NAPLES, FL 34109

Current Mailing Address:

C/O KOVA PROPERTY MANAGMENT, LLC
P.O. BOX 110876
NAPLES, FL 34108 US

FEI Number: 65-0818201

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KOVA PROPERTY MANAGEMENT, LLC
C/O KOVA PROPERTY MANAGMENT, LLC
9130 GALLERIA COURT SUITE 100
NAPLES, FL 34109 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: ANTHONY EMMA

04/05/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name GAUTA, JOSEPH
Address 1890 SW HEALTH PKWY, STE 205
City-State-Zip: NAPLES FL 34109

Title PRESIDENT
Name SINGER, MARK
Address 1890 SW HEALTH PKWY, SUITE 104
City-State-Zip: NAPLES FL 34109

Title SECRETARY, TREASURER
Name BEVINS, JENNIFER
Address 1890 SW HEALTH PKWY, STE 303
City-State-Zip: NAPLES FL 34109

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: MARK SINGER

PRESIDENT

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date