## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000000785

Entity Name: SOUTHWIND OWNERS ASSOCIATION AT FORT MYERS, INC.

FILED
Apr 05, 2021
Secretary of State
7199645446CC

## **Current Principal Place of Business:**

1314 CAPE CORAL PKWY E #205 CAPE CORAL. FL 33904

## **Current Mailing Address:**

PO BOX 152930

CAPE CORAL, FL 33915 US

FEI Number: 65-1000603 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COASTAL ASSOCIATION SERVICES, LLC 1314 CAPE CORAL PKWY E #205 CAPE CORAL, FL 33904 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: TROY FUTCH 04/05/2021

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title SECRETARY

Name YATES, MARSHA Name BALLARD, PATRICIA

Address PO BOX 152930 Address PO BOX 152930

City-State-Zip: CAPE CORAL FL 33915 City-State-Zip: CAPE CORAL FL 33915

Title TREASURER Title DIRECTOR

Name ERICKSON, KEITH Name SONNTAG, MARK
Address PO BOX 152930 Address PO BOX 152930

City-State-Zip: CAPE CORAL FL 33915 City-State-Zip: CAPE CORAL FL 33915

Title VP

Name BUCHHOLZ, RICK Address PO BOX 152930

City-State-Zip: CAPE CORAL FL 33915

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: MARSHA YATES PRESIDENT 04/05/2021

Date