

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # N40521

1. Entity Name
THE COTTAGES AT BAREFOOT CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business
2681 AIRPORT RD SOUTH
C-101
NAPLES, FL 34112 US

Mailing Address
2681 AIRPORT RD SOUTH
C-101
NAPLES, FL 34112 US



01172005 No Chg-NP CR2E037 (10/03)

4. FEI Number
65-0262376

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

JOANIDES, JOHN C
2681 AIRPORT RD SOUTH, C-101
NAPLES, FL 34112

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BUBRICK, MEL
STREET ADDRESS	265 SHELL DR
CITY-STATE-ZIP	BONITA SPRINGS, FL 34134
TITLE	D
NAME	MANFREDI, RICHARD
STREET ADDRESS	285 SHELL DR
CITY-STATE-ZIP	BONITA SPRINGS, FL 34134
TITLE	D
NAME	JOHNSON, RODERIC
STREET ADDRESS	5515 W 130TH ST
CITY-STATE-ZIP	PALOS HEIGHTS, IL 60643
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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01/26/05-80014-014 61.25

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mel P. Bubrick *Richard A. Manfredi* *Roderic Johnson* *Vito Chirino*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

FLY