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: JAMES BAILEY

**BOX 68** 

City-State-Zip: MONHEGAN ISLAND ME 04852

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

Electronic Signature of Registered Agent

Name	JOHNSON, RICHARD	Name	BAILEY, JAMES
Address	206 TINA ISLAND DR	Address	205 TINA ISLAND DR
City-State-Zip:	OSPREY FL 34229	City-State-Zip:	OSPREY FL 34229
Title	VICE-PRESIDENT	Title	SECRETARY
Name	CHAMBERS, CHERI	Name	MILTON, PAMELA
Address	209 VILLA DR	Address	201 VILLA DR
City-State-Zip:	OSPREY FL 34229	City-State-Zip:	OSPREY FL 34229
Title	DIRECTOR	Title	DIRECTOR
Name	WACKELIN, ANDREE	Name	SKELTON, BRAD J
Address	208 VILLA DR	Address	209 VILLA DR
City-State-Zip:	OSPREY FL 34229	City-State-Zip:	OSPREY FL 34229
Title	DIRECTOR		
Name	STANLEY, SHERMAN		

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.

### **Officer/Director Detail :**

Title

Address

I

SIGNATURE: JAMES BAILEY

### Name and Address of Current Registered Agent:

BAILEY, JAMES 205 TINA ISLAND DR

OSPREY, FL 34229 US

OSPREY, FL 34229 US

## **DOCUMENT# 713919**

Entity Name: SORRENTO VILLAS, SECTION 2 ASSOCIATION, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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

205 TINA ISLAND DR OSPREY, FL 34229

# **Current Mailing Address:**

205 TINA ISLAND DR

### FEI Number: 59-1663031

Title

TREASURER

TREASURER

Certificate of Status Desired: No

FILED Apr 18, 2022 Secretary of State 0495755845CC

> 04/18/2022 Date

04/18/2022 Date