

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732360

**Entity Name:** NAPLES TIERRA DEL SOL, INC.

**Current Principal Place of Business:**

C/O PARAMONT PROPERTY  
5629 STRAND BLVD 412  
NAPLES, FL 34110

**Current Mailing Address:**

C/O PARAMONT PROPERTY  
5629 STRAND BLVD 412  
NAPLES, FL 34110 US

**FEI Number:** 59-2004987

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PARAMONT PROPERTY MANAGEMENT  
C/O PARAMONT PROPERTY  
5629 STRAND BLVD 412  
NAPLES, FL 34110 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:** ALICIA VIVAS

03/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HEFFLER, DUANE  
Address        PARAMONT PROPERTY  
                  5629 STRAND BLVD 412  
City-State-Zip: NAPLES FL 34110

Title            VP  
Name            CHEMOTTI, DANIEL  
Address        PARAMONT PROPERTY  
                  5629 STRAND BLVD 412  
City-State-Zip: NAPLES FL 34110

Title            SECRETARY, TREASURER  
Name            SHARPE, KATHLEEN  
Address        PARAMONT PROPERTY  
                  5629 STRAND BLVD 412  
City-State-Zip: NAPLES FL 34110

Title            TREASURER  
Name            SHARPE, KATHLEEN  
Address        DIRECTORS CHOICE, LLC  
                  3784 PROGRESS AVENUE, SUITE  
                  #107  
City-State-Zip: NAPLES FL 34104

Title            DIRECTOR  
Name            CONDON, ANN-MARIE  
Address        PARAMONT PROPERTY  
                  5629 STRAND BLVD 412  
City-State-Zip: NAPLES FL 34110

Title            DIRECTOR  
Name            BEAUREGARD, KIMBERLY A.  
Address        PARAMONT PROPERTY  
                  5629 STRAND BLVD 412  
City-State-Zip: NAPLES FL 34110

*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:** DUANE HEFFLER

PRESIDENT

03/10/2023

Electronic Signature of Signing Officer/Director Detail

Date