

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739161

**Entity Name:** SPANISH LAKES PARK ASSOCIATION OF NOKOMIS, INC.**Current Principal Place of Business:**1340 TAMIAMI TRAIL  
NOKOMIS, FL 34275**Current Mailing Address:**1340 TAMIAMI TRAIL  
NOKOMIS, FL 34275**FEI Number:** 59-1965204**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ERICKSON, JANICE  
348 SANTA CRUZ  
NOKOMIS, FL 34275 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:** JANICE ERICKSON

01/26/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SEC  
Name FITZGERALD, CINDY  
Address 342 SANTA CRUZ  
City-State-Zip: NOKOMIS FL 34275

Title TREA  
Name ERICKSON, JANICE  
Address 348 SANTA CRUZ  
City-State-Zip: NOKOMIS FL 34275

Title FIRST VP  
Name STUTTLE, KRISTA  
Address 44 SIERRA VISTA  
City-State-Zip: NOKOMIS FL 34275

Title PRES  
Name BOESCH, DENISE  
Address 353 SANTA CRUZ  
City-State-Zip: NOKOMIS FL 34275

Title SECOND VP  
Name FAUCI, DEAN  
Address 352 SANTA CRUZ  
City-State-Zip: NOKOMIS FL 34275

Title FACILITIES DIRECTOR  
Name BROMLEY, DON  
Address 268 PINTA  
City-State-Zip: NOKOMIS FL 34275

Title DIRECTOR OF COMMUNICATIONS  
Name STRONGARONE, PATRICIA  
Address 58 LA COSTA  
City-State-Zip: NOKOMIS FL 34275

Title KITCHEN DIRECTOR  
Name FITZGERALD, MIKE  
Address 342 SANTA CRUZ  
City-State-Zip: NOKOMIS FL 34275

*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:** JANICE ERICKSON**TREASURER**

01/26/2022

Electronic Signature of Signing Officer/Director Detail

Date