## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 739339** 

Entity Name: COMMODORE II CONDOMINIUM ASOCIATION, INC.

FILED Feb 20, 2020 Secretary of State 6201223046CC

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

AMERICAN CONDO MANAGEMENT 4223 DEL PRADO BLVD S CAPE CORAL, FL 33904

## **Current Mailing Address:**

AMERICAN CONDO MANAGEMENT PO BOX 100399 CAPE CORAL, FL 33910 US

FEI Number: 59-1870847 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KASE, SUSAN AMERICAN CONDO MANAGEMENT 4223 DEL PRADO BLVD S 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: SUSAN KASE 02/20/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

 Title
 PRES
 Title
 TREASURER

 Name
 BOLEY, BILL
 Name
 PAGE, WAYNE

Address AMERICAN CONDO MANAGEMENT Address AMERICAN CONDO MANAGEMENT

PO BOX 100399 PO BOX 100399

City-State-Zip: CAPE CORAL FL 33910 City-State-Zip: CAPE CORAL FL 33910

Title VP Title SECRETARY

Name MCELRATH, STEVEN Name ASTWOOD, NORMAN

Address AMERICAN CONDO MANAGEMENT Address AMERICAN CONDO MANAGEMENT

PO BOX 100399 PO BOX 100399

City-State-Zip: CAPE CORAL FL 33910 City-State-Zip: CAPE CORAL FL 33910

Title VP

Name HOUCK, JOHN

Address AMERICAN CONDO MANAGEMENT

PO BOX 100399

City-State-Zip: CAPE CORAL FL 33910

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: BILL BOLEY PRESIDENT 02/20/2020