

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 742924

**Entity Name:** COMMODORE CLUB CONDOMINIUM ASSOCIATION OF BURNT  
STORE MARINA, INC.**FILED**  
**Mar 25, 2016**  
**Secretary of State**  
**CC1077542641****Current Principal Place of Business:**1532 RIO DE JANEIRO AVE  
PUNTA GORDA, FL 33980**Current Mailing Address:**P.O. BOX 380758  
MURDOCK, FL 33938**FEI Number: 59-2014947****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**THE GATEWAY GROUP  
1532 RIO DE JANEIRO AVENUE  
PUNTA GORDA, FL 33983 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**Title PD  
Name PAUL, ROBERT  
Address PO BOX 380758  
City-State-Zip: MURDOCK FL 33938Title VPTD  
Name LOREDO, TOM  
Address PO BOX 380758  
City-State-Zip: MURDOCK FL 33938Title SD  
Name SPITLER, JOHN  
Address PO BOX 380758  
City-State-Zip: MURDOCK FL 33938Title D  
Name FECKANIN, MIKE  
Address PO BOX 380758  
City-State-Zip: MURDOCK FL 33938Title D  
Name MORAND, THEODORE  
Address PO BOX 380758  
City-State-Zip: MURDOCK FL 33938Title DIRECTOR  
Name DELEONARDIS, JOE  
Address PO BOX 380758  
City-State-Zip: MURDOCK FL 33938

*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: ROBERT PAUL****PRESIDENT****03/25/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date