

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746321

Entity Name: SPANISH WELLS HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**12650 WHITEHALL DR
FT MYERS, FL 33907**Current Mailing Address:**C/O RESORT MANAGEMENT
2685 HORSESHOE DR. S. SUITE # 215
NAPLES, FL 34104 US**FEI Number:** 59-2022320**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MIKES, JASON H
711 5TH AVENUE SOUTH
SUITE #212
NAPLES, FL 34102 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:** JASON HAMILTON MIKES

04/15/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	NEYHART, KEN
Address	28403 TASCA DR.
City-State-Zip:	BONITA SPRINGS FL 34135

Title	VP
Name	JACOBSON, DAVID
Address	28406 TASCA DRIVE
City-State-Zip:	BONITA SPRINGS FL 34135

Title	DIRECTOR
Name	BURICH, CARL
Address	28409 TASCA DRIVE
City-State-Zip:	BONITA SPRINGS FL 34135

Title	SECRETARY, TREASURER
Name	EVERLY, LAWERENCE
Address	9851 TREASURE CAY LANE
City-State-Zip:	BONITA SPRINGS FL 34135

Title	DIRECTOR
Name	SELEEN, KEITH
Address	9915 TREASURE CAY LN
City-State-Zip:	BONITA SPRINGS FL 34135

Title	DIRECTOR
Name	TALAY, ROBERT
Address	24 LEARY LN
City-State-Zip:	NESONSET NY 11767

Title	DIRECTOR
Name	SCHOELER, PAUL
Address	28395 TASCA DR
City-State-Zip:	BONITA SPRINGS FL 34135

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: KENNETH NEYHART

PRESIDENT

04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date