2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759065

Entity Name: COUNTRY PINES OF NORTH FORT MYERS CONDOMINIUM

ASSOCIATION, INC.

FILED Feb 16, 2024 Secretary of State 6944330822CC

Current Principal Place of Business:

3434 HANCOCK BRIDGE PKWY

SUITE 306

NORTH FORT MYERS, FL 33903

Current Mailing Address:

C/O VESTA PROPERTY SERVICES 3434 HANCOCK BRIDGE PKWY 306 NORTH FORT MYERS, FL 33903 US

FEI Number: 59-2267111 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

VESTA PROPERTY SERVICES 3434 HANCOCK BRIDGE PKWY SUITE 306 NORTH FORT MYERS, FL 33903 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: SAMIE MANNINA 02/16/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VI

Name DEFEE, JAMES Name WINSLOW, CAROL

Address C/O VESTA PROPERTY SERVICES Address C/O VESTA PROPERTY SERVICES

3434 HANCOCK BRIDGE PKWY 306 3434 HANCOCK BRIDGE PKWY 306

City-State-Zip: NORTH FORT MYERS FL 33903 City-State-Zip: NORTH FORT MYERS FL 33903

TitleTREASURERTitleSECRETARYNameMAHLERT, MARIENameSCHOUP, TIM

Address C/O VESTA PROPERTY SERVICES Address C/O VESTA PROPERTY SERVICES

3434 HANCOCK BRIDGE PKWY 306 3434 HANCOCK BRIDGE PKWY 306

City-State-Zip: NORTH FORT MYERS FL 33903 City-State-Zip: NORTH FORT MYERS FL 33903

Title DIRECTOR Title DIRECTOR

Name HARRISON, PAUL Name HARRISON, NEIL

Address C/O VESTA PROPERTY SERVICES Address C/O VESTA PROPERTY SERVICES

3434 HANCOCK BRIDGE PKWY 306 3434 HANCOCK BRIDGE PKWY 306

City-State-Zip: NORTH FORT MYERS FL 33903 City-State-Zip: NORTH FORT MYERS FL 33903

Title DIRECTOR

Name GIROUX, JAMES

Address C/O VESTA PROPERTY SERVICES

3434 HANCOCK BRIDGE PKWY 306

City-State-Zip: NORTH FORT MYERS FL 33903

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: JAMES DEFEE PRESIDENT 02/16/2024