

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759065

**FILED**  
**Jun 02, 2020**  
**Secretary of State**  
**3474169996CC**

**Entity Name:** COUNTRY PINES OF NORTH FORT MYERS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3436 MARINATOWN LANE  
STE 3  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

C/O PREMIER CAM SERVICES, LLC  
P.O. BOX 152047  
CAPE CORAL, FL 33915 US

**FEI Number: 59-2267111**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PREMIER CAM SERVICES, LLC  
3436 MARINATOWN LANE  
STE 3  
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: BRANDY DAVENPORT**

**06/02/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DEFEE, JAMES  
Address C/O PREMIER CAM SERVICES, LLC  
P.O. BOX 152047  
City-State-Zip: CAPE CORAL FL 33915

Title DIRECTOR  
Name KINCAID, CATHY  
Address C/O PREMIER CAM SERVICES, LLC  
P.O. BOX 152047  
City-State-Zip: CAPE CORAL FL 33915

Title TREASURER  
Name LABARGE, DONALD  
Address C/O PREMIER CAM SERVICES, LLC  
P.O. BOX 152047  
City-State-Zip: CAPE CORAL FL 33915

Title S  
Name DOMRES, ARTHUR  
Address C/O PREMIER CAM SERVICES, LLC  
P.O. BOX 152047  
City-State-Zip: CAPE CORAL FL 33915

Title VP  
Name FUTCH, DEBORAH  
Address C/O PREMIER CAM SERVICES, LLC  
P.O. BOX 152047  
City-State-Zip: CAPE CORAL FL 33915

*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**

**06/02/2020**

Electronic Signature of Signing Officer/Director Detail

Date