

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759243

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC8855054963**

**Entity Name:** CLUB REGENCY OF MARCO ISLAND CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

500 S. COLLIER BLVD.  
MARCO ISLAND, FL 34145

**Current Mailing Address:**

599 S COLLIER BLVD  
STE 113  
MARCO ISLAND, FL 34145 US

**FEI Number: 59-2800972**

**Certificate of Status Desired: No**

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

HILTON GRAND VACATIONS MANAGEMENT, LLC  
6355 METROWEST BLVD.  
SUITE 180  
ORLANDO, FL 32835 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 PEARMAN, RALPH S  
Address 1119 N. MAIN ST PO BOX 340  
City-State-Zip: PARIS IL 61944

Title D  
Name KENNEDY, TIMOTHY  
Address 4733 BRYANT AVE. SOUTH  
City-State-Zip: MINNEAPOLIS MN 55419

Title S  
Name BREHM, JANICE  
Address 10 SOUTHVIEW DRIVE  
City-State-Zip: KEENE NH 03431

Title TD  
Name PINENO, CHARLES JDR.  
Address 314 CRAIG DRIVE  
City-State-Zip: STEPHENS CITY VA 22655

Title VP  
Name LEE, CLARK  
Address 525 KADLER AVE NE  
City-State-Zip: HANOVER MN 55341

*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: RALPH S. PEARMAN**

**PRESIDENT**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date