

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006578

**Entity Name:** MEDICI AT MEDITERRA NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

%GULF BREEZE MGMT. SVCS., LLC  
8910 TERRENE COURT, SUITE 200  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

%GULF BREEZE MGMT. SVCS., LLC  
8910 TERRENE COURT, SUITE 200  
BONITA SPRINGS, FL 34135

**FEI Number:** 59-3676541

**Certificate of Status Desired:** No

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

WEIDNER, RALPH L  
%GULF BREEZE MGMT. SVCS. LLC  
8910 TERRENE COURT, SUITE 200  
BONITA SPRINGS, FL 34135 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 1VD  
Name LYNCH, TIMOTHY  
Address 8910 TERRENE COURT, SUITE 200  
City-State-Zip: BONITA SPRINGS FL 34135

Title PD  
Name GOLDHABER, RICHARD  
Address 8910 TERRENE COURT, SUITE 200  
City-State-Zip: BONITA SPRINGS FL 34135

Title STD  
Name LAPIDUS, JUNE  
Address 8910 TERRENE COURT, SUITE 200  
City-State-Zip: BONITA SPRINGS FL 34135

Title 2VD  
Name WESSEL, JEFFREY  
Address 8910 TERRENE COURT, SUITE 200  
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:** RICHARD GOLDHABER

**PRESIDENT**

**04/23/2013**

Electronic Signature of Signing Officer/Director Detail

Date