2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01360

Entity Name: BAREFOOT PELICAN CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 09, 2024
Secretary of State
6988418281CC

Current Principal Place of Business:

271 SOUTHBAY DR NAPLES, FL 34108

Current Mailing Address:

DAVIS & ASSOCIATES CPAS 28901 TRAILS EDGE BLVD. STE 205 BONITA SPRINGS. FL 34134 US

FEI Number: 59-2383606 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

HENSLEY, STEPHANIE DAVIS & ASSOCIATES CPAS 28901 TRAILS EDGE BLVD. STE. 205 BONITA SPRINGS, FL 34134 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: STEPHANIE HENSLEY 04/09/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title VP

Name WOOLLEY, KAY Name KAUFMANN, RICK

Address DAVIS & ASSOCIATES CPAS Address DAVIS & ASSOCIATES CPAS

28901 TRAILS EDGE BLVD STE 201 28901 TRAILS EDGE BLVD STE 201

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

Title PRESIDENT Title SECRETARY

Name NEFF, HOWARD Name SEELY, MATTHEW

Address DAVIS & ASSOCIATES CPAS Address DAVIS & ASSOCIATES CPAS

28901 TRAILS EDGE BLVD STE 201 28901 TRAILS EDGE BLVD STE 201

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: BONITA SPRINGS FL 34134

Title TREASURER

Name DAMMAN, WARREN

Address DAVIS & ASSOCIATES CPAS

28901 TRAILS EDGE BLVD STE 201

City-State-Zip: BONITA SPRINGS FL 34134

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: HOWARD NEFF PRESIDENT 04/09/2024