## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008760

Entity Name: MARBELLA AT SPANISH WELLS HOMEOWNERS ASSOCIATION

INC.

FILED
Apr 22, 2015
Secretary of State
CC1029096581

## **Current Principal Place of Business:**

C/O COMPASS MANAGEMENT GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103

## **Current Mailing Address:**

C/O COMPASS MANAGEMENT GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 US

FEI Number: 04-2755418 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COMPASS GROUP 4851 TAMIAMI TRAIL N STE 400 NAPLES, FL 34103 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 PRESIDENT Title VP, SECRETARY

Name SPOTZ, LINDA Name GRIFFITH, JAMES

Address C/O COMPASS MANAGEMENT Address C/O COMPASS MANAGEMENT

GROUP GROUP

4851 TAMIAMI TRAIL N STE 400 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title D Title T

Name PINO, SANTO Name HINES, WALTER

Address C/O COMPASS MANAGEMENT Address C/O COMPASS MANAGEMENT

GROUP GROUP

4851 TAMIAMI TRAIL N STE 400 4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103 City-State-Zip: NAPLES FL 34103

Title D

Name SIRAGUSA, NICK

Address C/O COMPASS MANAGEMENT

**GROUP** 

4851 TAMIAMI TRAIL N STE 400

City-State-Zip: NAPLES FL 34103

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: LINDA SPOTZ PRESIDENT 04/22/2015