

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 30, 2014
Secretary of State
CC5023361510

Entity Name: MARBELLA AT SPANISH WELLS HOMEOWNERS ASSOCIATION, INC.

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
Name BONTEN, CARLA
Address C/O COMPASS MANAGEMENT GROUP
 4851 TAMIAMI TRAIL N STE 400
City-State-Zip: NAPLES FL 34103

Title VP
Name GRIFFITH, JAMES
Address C/O COMPASS MANAGEMENT GROUP
 4851 TAMIAMI TRAIL N STE 400
City-State-Zip: NAPLES FL 34103

Title D
Name MALCOLM, KENNETH
Address C/O COMPASS MANAGEMENT GROUP
 4851 TAMIAMI TRAIL N STE 400
City-State-Zip: NAPLES FL 34103

Title T
Name HINES, WALTER
Address C/O COMPASS MANAGEMENT GROUP
 4851 TAMIAMI TRAIL N STE 400
City-State-Zip: NAPLES FL 34103

Title D
Name SMITH, HAROLD
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: CARLA BONTEN

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04/30/2014

Electronic Signature of Signing Officer/Director Detail

Date