

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000008959

**Entity Name:** RAVENNA AT SUN CITY CENTER FT. MYERS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Mar 12, 2018**  
**Secretary of State**  
**CC3734687569**

**Current Principal Place of Business:**

J GARTH & ASSOCIATES  
12995 SOUTH CLEVELAND AVE, SUITE 30  
FT. MYERS, FL 33907

**Current Mailing Address:**

J GARTH & ASSOCIATES  
P.O. BOX 61851  
FT. MYERS, FL 33906 US

**FEI Number: 46-0512749**

**Certificate of Status Desired: No**

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

J GARTH & ASSOCIATES  
12995 SOUTH CLEVELAND AVE, SUITE 30  
FT. MYERS, FL 33907 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            JOHNSON, BONNIE  
Address        P.O. BOX 61851  
City-State-Zip: FT. MYERS FL 33906

Title            VP  
Name            ELFES, NANCY  
Address        P.O. BOX 61851  
City-State-Zip: FT. MYERS FL 33913

Title            SECRETARY/TREASURER  
Name            WEBSTER, SHIRLEY  
Address        P.O. BOX 61851  
City-State-Zip: FT. MYERS FL 33906

Title            DIRECTOR  
Name            BLACKBURN, MARGERY  
Address        J GARTH & ASSOCIATES  
                 12995 SOUTH CLEVELAND AVE,  
                 SUITE 30  
City-State-Zip: FT. MYERS FL 33907

*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: BONNIE JOHNSON**

**PRESIDENT**

**03/12/2018**

Electronic Signature of Signing Officer/Director Detail

Date