Electronic Signature of Signing Officer/Director Detail

PRESIDENT

2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
<u>REPORT</u>

DOCUMENT# N05801

Entity Name: LELY VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172 NAPLES, FL 34104

Current Mailing Address:

COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172 NAPLES, FL 34104 US

FEI Number: 59-2567258

Name and Address of Current Registered Agent:

BURGIN, LEE COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172 NAPLES, FL 34104 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	E: LEE BURGIN		06/02/2022		
	Electronic Signature of Registered Agent		Date		
Officer/Director Detail :					
Title	PRESIDENT	Title	VICE PRESIDENT		
Name	SHAW, BARBARA	Name	DAHLKE, SUSI M		
Address	COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172	Address	COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172		
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104		
Title	SECRETARY	Title	TREASURER		
Name	GROVES, DEBORAH	Name	MATTHEWS, RICHARD		
Address	COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172	Address	COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172		
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104		
Title	DIRECTOR				
Name	SPEROUNIS, THEODOSIOS				
Address	COMPLETE PROPERTY MANAGEMENT OF SWFL 3050 NORTH HORSESHOE DR. STE. # 172				
City-State-Zip:	NAPLES FL 34104				

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: BARBARA SHAW

FILED Jun 02, 2022 Secretary of State 9789692975CC

Certificate of Status Desired: No

06/02/2022 Date