Entity Name: VILLAGES AT STELLA MARIS CONDOMINIUM ASSOCIATION 2400, INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

C/O RESORT MANAGEMENT 2685 HORSESHOE DR S SUITE#215 NAPLES, FL 34104

DOCUMENT# N0600000252

Current Mailing Address:

C/O RESORT MANAGEMENT 2685 HORSESHOE DR S SUITE#215 NAPLES, FL 34104 US

FEI Number: 20-4549520

Name and Address of Current Registered Agent:

RESORT MANAGEMENT C/O RESORT MANAGEMENT 2685 HORSESHOE DR S SUITE#215 NAPLES, FL 34104 US Certificate of Status Desired: No

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	ROBERT ROSENOW		04/10/2024
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	VP	Title	PRESIDENT
Name	DIUNIZIO, MARK	Name	CAREY, JOHN T
Address	C/O RESORT MANAGEMENT 2685 HORSESHOE DR S SUITE#215	Address	C/O RESORT MANAGEMENT 2685 HORSESHOE DR S SUITE#215
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34104
Title	TREASURER		
Name	TOMEK, FRANCIS K		
Address	C/O RESORT MANAGEMENT 2685 HORSESHOE DR S SUITE#215		
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: FRANCIS K TOMEK

TREASURE

04/10/2024 Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 10, 2024 Secretary of State 1359862937CC