# Entity Name: WESTVIEW COMMERCIAL PARK CONDOMINIUM ASSOCIATION, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**Current Principal Place of Business:** 

3440, 3450 WESTVIEW DR. NAPLES, FL 34104

## **Current Mailing Address:**

DOCUMENT# N06000012285

C/O KOVA PROPERTY MANAGMENT, LLC P.O. BOX 110876 NAPLES, FL 34108 US

### FEI Number: 20-8612999

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

KOVA PROPERTY MANAGEMENT, LLC 9130 GALLERIA COURT SUITE 100 NAPLES, FL 34109 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.

ANTHONY EMMA			03/31/2017
Electronic Signature of Registered Agent			Date
tor Detail :			
PRESIDENT	Title	VP	
SIMPSON, DAVID	Name	LONGLEY, WILLIAM	
3770 RUM ROW	Address	3037 LORIDAN WAY	
NAPLES FL 34102	City-State-Zip:	ATLANTA GA 30339	
SECRETARY, TREASURER			
GOLDMAN, ROBERT			
12543 COLLIERS RESERVE DR			
NAPLES FL 34110			
	tor Detail : PRESIDENT SIMPSON, DAVID 3770 RUM ROW NAPLES FL 34102 SECRETARY, TREASURER GOLDMAN, ROBERT 12543 COLLIERS RESERVE DR	Electronic Signature of Registered Agent   etor Detail :   PRESIDENT Title   SIMPSON, DAVID Name   3770 RUM ROW Address   NAPLES FL 34102 City-State-Zip:   SECRETARY, TREASURER GOLDMAN, ROBERT   12543 COLLIERS RESERVE DR Estable	Electronic Signature of Registered Agent   ettor Detail :   PRESIDENT Title   SIMPSON, DAVID Name   3770 RUM ROW Address   NAPLES FL 34102 City-State-Zip:   SECRETARY, TREASURER   GOLDMAN, ROBERT   12543 COLLIERS RESERVE DR

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: DAVID SIMPSON

PRESIDENT

03/31/2017

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date