## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000012015

Entity Name: VERANDA IV AT BONITA NATIONAL CONDOMINIUM

ASSOCIATION, INC.

## **Current Principal Place of Business:**

C/O TROPICAL ISLES MANAGEMENT 12734 KENWOOD LN., STE. 49 FT. MYERS, FL 33907

## **Current Mailing Address:**

C/O TROPICAL ISLES MANAGEMENT 12734 KENWOOD LN., STE. 49 FT. MYERS, FL 33907 US

FEI Number: 81-4791810 Certificate of Status Desired: No.

## Name and Address of Current Registered Agent:

TROPICAL ISLES MANAGEMENT SERVICES, INC C/O TROPICAL ISLES MANAGEMENT 12734 KENWOOD LN., STE. 49 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: DON ROEDDING 04/10/2023

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **TREASURER** Title **PRESIDENT** MACLENNAN, TERRY Name Name PRIOR, JOHN

Address C/O TROPICAL ISLES MANAGEMENT Address C/O TROPICAL ISLES MANAGEMENT

12734 KENWOOD LN., STE. 49 12734 KENWOOD LN., STE. 49

FT. MYERS FL 33907 FT. MYERS FL 33907 City-State-Zip: City-State-Zip:

Title **SECRETARY** 

PENNINGTON, PIEL Name

C/O TROPICAL ISLES MANAGEMENT Address

12734 KENWOOD LN., STE. 49

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.

**FILED** Apr 10, 2023

**Secretary of State** 

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