

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000014130

**Entity Name:** ARDENA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

24311 WALDEN CENTER DR STE 300  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

24311 WALDEN CENTER DR STE 300  
BONITA SPRINGS, FL 34134

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

RAY, LAURA  
24311 WALDEN CENTER DR STE 300  
BONITA SPRINGS, FL 34134 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            BROOKS, SCOTT  
Address        24311 WALDEN CENTER DR STE 300  
City-State-Zip: BONITA SPRINGS FL 34134

Title            VP  
Name            MORTON, KIMBERLY  
Address        24311 WALDEN CENTER DR STE 300  
City-State-Zip: BONITA SPRINGS FL 34134

Title            SECRETARY, TREASURER  
Name            RAY, LAURA  
Address        24311 WALDEN CENTER DR STE 300  
City-State-Zip: BONITA SPRINGS FL 34134

*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:** SCOTT BROOKS

PRESIDENT

08/17/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

Date