

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23097

**Entity Name:** CROWNE POINTE COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**C/O GUARDIAN PROPERTY MGMT  
6704 LONE OAK BLVD  
NAPLES, FL 34109**Current Mailing Address:**6704 LONE OAK BLVD  
NAPLES, FL 34109 US**FEI Number:** 65-0203325**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ANCHOR ASSOCIATES, INC.  
C/O GUARDIAN PROPERTY MGMT  
6704 LONE OAK BLVD  
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.***SIGNATURE:** BRAD PHELPS

03/26/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            FORNARIO, FRANK  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

Title            VICE PRESIDENT  
Name            SELWOLD, TOM  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

Title            TREASURER, SECRETARY  
Name            TAYLOR, RODGER  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

Title            DIRECTOR  
Name            GLASER, DIANA  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

Title            DIRECTOR  
Name            DZIAMARA, SUE  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

Title            DIRECTOR  
Name            NORDBERG, DAN  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

Title            DIRECTOR  
Name            AVREN, SUSAN  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

Title            DIRECTOR  
Name            LIMING, BETTY  
Address        6704 LONE OAK BLVD  
City-State-Zip: NAPLES FL 34109

*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:** FRANK FORNARIO

PRESIDENT

03/26/2022

Electronic Signature of Signing Officer/Director Detail

Date