

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23712

**Entity Name:** ARENA DE MADEIRA CONDOMINIUM, INC.

**FILED**  
**Feb 02, 2017**  
**Secretary of State**  
**CC9204203270**

**Current Principal Place of Business:**

ARENA DE MADEIRA  
14110 GULF BLVD.  
MADIERA BEACH, FL 33708

**Current Mailing Address:**

PO BOX 86507  
MADEIRA BEACH, FL 33738 US

**FEI Number: 59-2110732**

**Certificate of Status Desired: No**

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

ADAMS, JOYCE  
5666 SEMINOLE BLVD  
SUITE 103  
SEMINOLE , FL 33772 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 OTHER  
Name VAN VLECK, JAN  
Address 5666 SEMINOLE BLVD  
103  
City-State-Zip: SEMINOLE FL 33772

Title OTHER  
Name CARROLL, JOHN  
Address 5666 SEMINOLE BLVD  
103  
City-State-Zip: SEMINOLE FL 33772

Title PRESIDENT  
Name CLARK, ART  
Address 5666 SEMINOLE BLVD  
103  
City-State-Zip: SEMINOLE FL 33772

Title VP  
Name KRAJINOVIC, STEVE  
Address 5666 SEMINOLE BLVD  
SUITE 103  
City-State-Zip: SEMINOLE FL 33772

Title SECRETARY, TREASURER  
Name FISCHER, TIMOTHY  
Address 5666 SEMINOLE BLVD  
103  
City-State-Zip: SEMINOLE FL 33772

*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: ART CLARK**

**PRESIDENT**

**02/02/2017**

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

\_\_\_\_\_  
Date