

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32807

FILED
Jan 31, 2022
Secretary of State
1727954807CC

Entity Name: MARBELLA COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH STREET
OSPREY, FL 34229

Current Mailing Address:

C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH STREET
OSPREY, FL 34229 US

FEI Number: 65-0125424

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICES OF WELLS OLAH COCHRAN, P.A.
3277 FRUITVILLE ROAD
BUILDING B
SARASOTA, FL 34237 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 VP
Name BRADY, MICHAEL
Address C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH STREET
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name FREEMAN, LYNN
Address C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH STREET
City-State-Zip: OSPREY FL 34229

Title TREASURER
Name FROST, KLAUS
Address C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH S
City-State-Zip: OSPREY FL 34229

Title PRESIDENT
Name BERNARD, BELINDA
Address C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH STREET
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name MITCHELL, ROBERT
Address C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH STREET
City-State-Zip: OSPREY FL 34229

Title SECRETARY
Name DIJOHNSON, LINDA
Address C/O LIGHTHOUSE PROPERTY MGMT.
16 CHURCH STREET
City-State-Zip: OSPREY FL 34229

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: MICHAEL BRADY

PRESIDENT

01/31/2022

Electronic Signature of Signing Officer/Director Detail

Date