## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47608

Entity Name: THE LAKE VILLAS OF WEDGEWOOD AT BONITA BAY III, INC.

**FILED** Apr 02, 2021 **Secretary of State** 4152712088CC

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

C/O GULF BREEZE MANAGEMENT SERVICES, INC.

8910 TERRENE COURT SUITE 200 BONITA SPRINGS, FL 34135

## **Current Mailing Address:**

C/O GULF BREEZE MANAGEMENT SERVICES, INC. 8910 TERRENE COURT SUITE 200 BONITA SPRINGS, FL 34135 US

FEI Number: 65-0394509 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WEIDNER, RALPH L C/O GULF BREEZE MANAGEMENT SERVICES, INC. 8910 TERRENE COURT SUITE 200 BONITA SPRINGS, FL 34135 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:

Title

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR, SECRETARY, Title PRESIDENT, DIRECTOR

> TREASURER Name BRODMAN, JAMES W.

HIMOWITZ, MICHAEL J Name C/O GULF BREEZE MANAGEMENT Address

C/O GULF BREEZE MANAGEMENT Address SERVICES, INC.

SERVICES, INC. 8910 TERRENE COURT SUITE 200 8910 TERRENE COURT SUITE 200

**BONITA SPRINGS FL 34135** City-State-Zip: City-State-Zip: **BONITA SPRINGS FL 34135** 

DIRECTOR Title

DIRECTOR Name FOISY, LOUISE Name CALLAHAN, BRIAN

Address C/O GULF BREEZE MANAGEMENT Address

C/O GULF BREEZE MANAGEMENT SERVICES, INC. SERVICES, INC.

8910 TERRENE COURT SUITE 200 8910 TERRENE COURT SUITE 200

BONITA SPRINGS FL 34135 City-State-Zip: BONITA SPRINGS FL 34135 City-State-Zip:

Title DIRECTOR, VP Name NOLAN, DAVID JR.

C/O GULF BREEZE MANAGEMENT Address

SERVICES, INC.

8910 TERRENE COURT SUITE 200

City-State-Zip: **BONITA SPRINGS FL 34135** 

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.

04/02/2021 SIGNATURE: JAMES BRODMAN **PRESIDENT** 

Date