

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N48856

**FILED**  
**Mar 26, 2020**  
**Secretary of State**  
**6284113087CC**

**Entity Name:** BAREFOOT BEACH CLUB IV CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4575 BONITA BEACH RD  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

COLLIER FINANCIAL, INC.  
4985 TAMIAMI TRAIL E.  
NAPLES, FL 34113 US

**FEI Number:** 59-3182840

**Certificate of Status Desired:** No

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

BECKER & POLIAKOFF, P.A.  
4001 TAMIAMI TRAIL NORTH  
SUITE 270  
NAPLES, FL 34103 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 SD  
Name STRICKLAND, SCOTT  
Address 259 BAREFOOT BEACH BLVD  
City-State-Zip: BONITA SPRINGS FL 34134

Title PD  
Name MUNTEAN, JOHN  
Address 259 BAREFOOT BEACH BLVD  
City-State-Zip: BONITA SPRINGS FL 34134

Title TD  
Name STEICHEN, MICHAEL  
Address 259 BAREFOOT BEACH BLVD  
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:** JOHN MUNTEAN

**PRESIDENT**

**03/26/2020**

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

\_\_\_\_\_  
Date