## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003013

Entity Name: SOUTHERN BREEZE CONDOMINIUM ASSOCIATION OF CAPE

CORAL, FL INC.

FILED
Apr 14, 2021
Secretary of State
8191503845CC

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

AMERICAN CONDO MANAGEMENT 4223 DEL PRADO S CAPE CORAL, FL 33904

## **Current Mailing Address:**

AMERICAN CONDO MANAGEMENT P.O. BOX 100399 CAPE CORAL, FL 33910 US

FEI Number: 59-2694236 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KASE, SUSAN AMERICAN CONDO MANAGEMENT 4223 DEL PRADO S CAPE CORAL, FL 33904 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

City-State-Zip:

CAPE CORAL FL 33910

Officer/Director Detail:

Title VP Title DIRECTOR

Name TATU, FRANCIS Name TENERELLI, VITO

Address AMERICAN CONDO MANAGEMENT Address AMERICAN CONDO MANAGEMENT

P.O. BOX 100399 P.O. BOX 100399

City-State-Zip: CAPE CORAL FL 33910 City-State-Zip: CAPE CORAL FL 33910

Title SECRETARY Title TREASURER

Name SPECHT, JAMIE Name DELOACH, THOMAS

Address AMERICAN CONDO MANAGEMENT Address AMERICAN CONDO MANAGEMENT

P.O. BOX 100399 P.O. BOX 100399

Title PRESIDENT

City-State-Zip:

Name CARVAHLO, WILLIAM

Address AMERICAN CONDO MANAGEMENT

CAPE CORAL FL 33910

P.O. BOX 100399

City-State-Zip: CAPE CORAL FL 33910

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: WILLIAM CARVAHLO PRESIDENT