

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000006581

**Entity Name:** PROVENCE OF NAPLES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4151 GULF SHORE BLVD N  
NAPLES, FL 34103**Current Mailing Address:**4151 GULF SHORE BLVD N  
NAPLES, FL 34103 US**FEI Number: 59-3507007****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MULLER, DAVID G ESQ.  
BECKER & POLIAKOFF  
4001 TAMiami TRAIL N. 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:** DAVID G. MULLER, ESQ.

03/19/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	LACY, CRAIG
Address	4151 GULF SHORE BLVD N #802
City-State-Zip:	NAPLES FL 34103

Title	ASST. TREASURER
Name	MORITZ, LYNNE
Address	4151 GULF SHORE BLVD N
City-State-Zip:	NAPLES FL 34103

Title	SECRETARY
Name	BASSETT, ROBERT
Address	4151 GULF SHORE BLVD. N. #1004
City-State-Zip:	NAPLES FL 34103

Title	PRESIDENT
Name	JACOBSON, LARRY
Address	4151 GULF SHORE BLVD. 1001
City-State-Zip:	NAPLES FL 34103
Title	VP
Name	WHITELAW, ROBERT
Address	4151 GULF SHORE BLVD. N. #1601
City-State-Zip:	NAPLES FL 34103
Title	DIRECTOR
Name	SYKES, DONALD
Address	4151 GULF SHORE BLVD. N 1503
City-State-Zip:	NAPLES FL 34103

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:** LARRY JACOBSON

PRESIDENT

03/19/2024

Electronic Signature of Signing Officer/Director Detail

Date