## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800000145

Entity Name: COZUMEL CONDOMINIUM ASSOCIATION, INC.

**FILED** Jan 14, 2015 **Secretary of State** CC0357827478

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

960 CAPE MARCO DRIVE MARCO ISLAND. FL 34145

## **Current Mailing Address:**

960 CAPE MARCO DRIVE MARCO ISLAND. FL 34145

FEI Number: 59-3487508 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NEAD, ROBERT 960 CAPE MARCO DRIVE MARCO ISLAND, FL 34145 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 :

2201

Title **SECRETARY** Title DIRECTOR NYCE, BEVERLY WICK, MIKE Name Name

960 CAPE MARCO DRIVE 960 CAPE MARCO DRIVE Address Address

1606

City-State-Zip: MARCO ISLAND FL 34145 City-State-Zip: MARCO ISLAND FL 34145

Title **TREASURER** Title **PRESIDENT** 

Name ARIS, PETROPOULOS Name HELWIG, JAMES

960 CAPE MARCO DR 960 CAPE MARCO DRIVE Address Address

1901 **SUITE 1305** 

MARCO ISLAND FL 34145 City-State-Zip: MARCO ISLAND FL 34145 City-State-Zip:

Title VΡ Title D

Name GILBERT, SCOTT Name SCHMIDT, LARRY

Address 960 CAPE MARCO DRIVE Address 960 CAPE MARCO DRIVE

2306

City-State-Zip: MARCO ISLAND FL 34145 City-State-Zip: MARCO ISLAND FL 34145

Title **DIRECTOR** 

PASSANTE, RICHARD Name

960 CAPE MARCO DRIVE Address

803

MARCO ISLAND FL 34145 City-State-Zip:

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.

01/14/2015 SIGNATURE: JAMES HELWIG **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date