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: MICHAEL BANNIGAN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

04/15/2019

Date

## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N9800000652

Entity Name: AUTUMN LAKE RECREATION ASSOCIATION, INC.

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

C/O SANDCASTLE COMMUNITY MANAGEMENT 9150 GALLERIA COURT SUITE 201 NAPLES, FL 34109

## **Current Mailing Address:**

C/O SANDCASTLE COMMUNITY MANAGEMENT 9150 GALLERIA COURT SUITE 201 NAPLES, FL 34109 US

## FEI Number: 59-3566785

### Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J 1833 HENDRY ST FORT MYERS, FL 33901 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

### Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	BANNIGAN, MICHAEL	Name	SPENCE, BOB
Address	9150 GALLERIA COURT SUITE 201	Address	9150 GALLERIA COURT SUITE 201
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34109
Title	SECRETARY	Title	TREASURER
Title Name	SECRETARY GRECO, DONNA	Title Name	TREASURER MAASSEN, RON

# Certificate of Status Desired: No

FILED Apr 15, 2019 Secretary of State 5290626846CC

cer/Director Detail

Date