

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

DOCUMENT# N99000004770

**Entity Name:** CLUBSIDE AT THE STRAND CONDOMINIUM NEIGHBORHOOD ASSOCIATION, INC.

**FILED**  
**Apr 16, 2024**  
**Secretary of State**  
**2668594641CC**

**Current Principal Place of Business:**

27180 BAY LANDING DR  
SUITE 4  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

27180 BAY LANDING DR  
SUITE 4  
BONITA SPRINGS, FL 34135 US

**FEI Number: 65-0975109**

**Certificate of Status Desired: No**

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

VESTA PROPERTY SERVICES  
27180 BAY LANDING DR  
SUITE 4  
BONITA SPRINGS, FL 34135 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: CARINA SHEFFIELD**

**04/16/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            OLIVO, ELISABETH  
Address        27180 BAY LANDING DR  
                  SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title            VP  
Name            BRITT, JACKIE  
Address        27180 BAY LANDING DRIVE  
                  SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title            TREASURER  
Name            PARETE, TONY  
Address        27180 BAY LANDING DRIVE  
                  SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title            SECRETARY  
Name            RUSSO , DENISE  
Address        27180 BAY LANDING DRIVE  
                  SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            JOHNSON, DAVID  
Address        27180 BAY LANDING DRIVE  
                  SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            POLLOCK, CHAN  
Address        27180 BAY LANDING DR  
                  SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

Title            DIRECTOR  
Name            ROE, MAXA  
Address        27180 BAY LANDING DR  
                  SUITE 4  
City-State-Zip: BONITA SPRINGS FL 34135

*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: ELISABETH OLIVO**

**PRESIDENT**

**04/16/2024**

Electronic Signature of Signing Officer/Director Detail

Date