

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004774

Entity Name: WEDGE WOOD AT THE STRAND CONDOMINIUM ASSOCIATION, INC.**FILED**
Feb 27, 2019
Secretary of State
0720155752CC**Current Principal Place of Business:**5435 JAEGER ROAD #4
NAPLES, FL 34109**Current Mailing Address:**C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
FORT MYERS, FL 33912 US**FEI Number: 65-0983264****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ASSOCIA GULF COAST
C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
FORT MYERS, FL 33912 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: JOHN HENSLEY****02/27/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name GABRIELE , STEVEN
Address C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR
Name LARSON, LYNN
Address C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
City-State-Zip: FORT MYERS FL 33912

Title TREASURER
Name EVANS, GEORGE
Address C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
City-State-Zip: FORT MYERS FL 33912

Title SECRETARY
Name CUNNINGHAM, KATHLEEN
Address C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR
Name SHAFFER, KERRY
Address C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR
Name SHIROFF, HARRY
Address C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR
Name MORGAN, LUCINDA
Address C/O ASSOCIA GULF COAST
13461 PARKER COMMONS BLVD,
City-State-Zip: FORT MYERS FL 33912

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: STEVEN GABRIELE**PRESIDENT****02/27/2019**

Electronic Signature of Signing Officer/Director Detail

Date