

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719650

**Entity Name:** TRAILS END VILLAS, INC.**Current Principal Place of Business:**4227 NORTHLAKE BOULEVARD  
PALM BEACH GARDENS, FL 33410**Current Mailing Address:**4227 NORTHLAKE BOULEVARD  
PALM BEACH GARDENS, FL 33410 US**FEI Number:** 59-1520442**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAW OFFICE OF J.M. CUNHA  
601 HERITAGE DRIVE  
SUITE 424  
JUPITER, FL 33458 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:** JENNIFER CUNHA

04/12/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TREASURER
Name	ATHEY, MARY
Address	4227 NORTHLAKE BOULEVARD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	VP
Name	LIVARCHIK, DAN
Address	4227 NORTHLAKE BOULEVARD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	PRESIDENT
Name	LAMBERT, DIANNE
Address	4227 NORTHLAKE BOULEVARD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	DIRECTOR
Name	JOYCE, ROBERT
Address	4227 NORTHLAKE BOULEVARD
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	SECRETARY
Name	STOWE, CONNIE
Address	4227 NORTHLAKE BOULEVARD
City-State-Zip:	PALM BEACH GARDENS FL 33410

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:** DIANNE LAMBERT

PRESIDENT

04/12/2018

Electronic Signature of Signing Officer/Director Detail

Date